



Legal Aid
Agency

Case Management Operational Performance

September 2021

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Contents

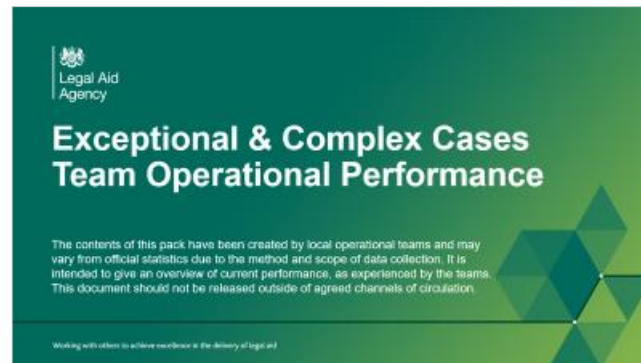


Legal Aid Agency

Civil Applications Operational Performance

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Working with others to achieve excellence in the delivery of legal aid

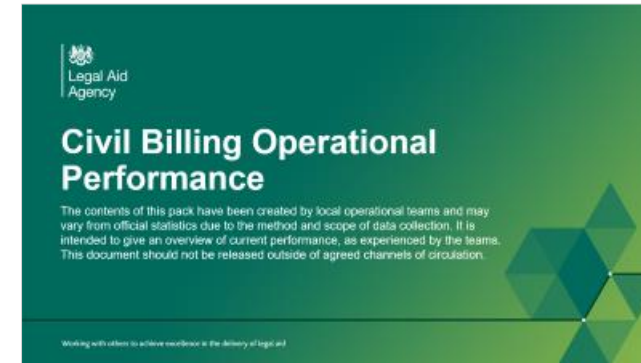


Legal Aid Agency

Exceptional & Complex Cases Team Operational Performance

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Civil Billing Operational Performance

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Civil Applications Operational Performance

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Contents

Section 1: Civil Applications

Please note that we are currently reviewing with our Management Information team to see if we can provide data on applications that has not yet been officially published.

Section 2: Legal Appeal Requests

Contains data on legal appeal requests

Section 3: Civil Means

Section 4: Quality Control

Section 5: Complaints

Section 6: High Cost Family

(Previously Very High Cost Cases)

Contains data on intakes, refusals and rejects.

Section 7: Future Development of Slide Pack

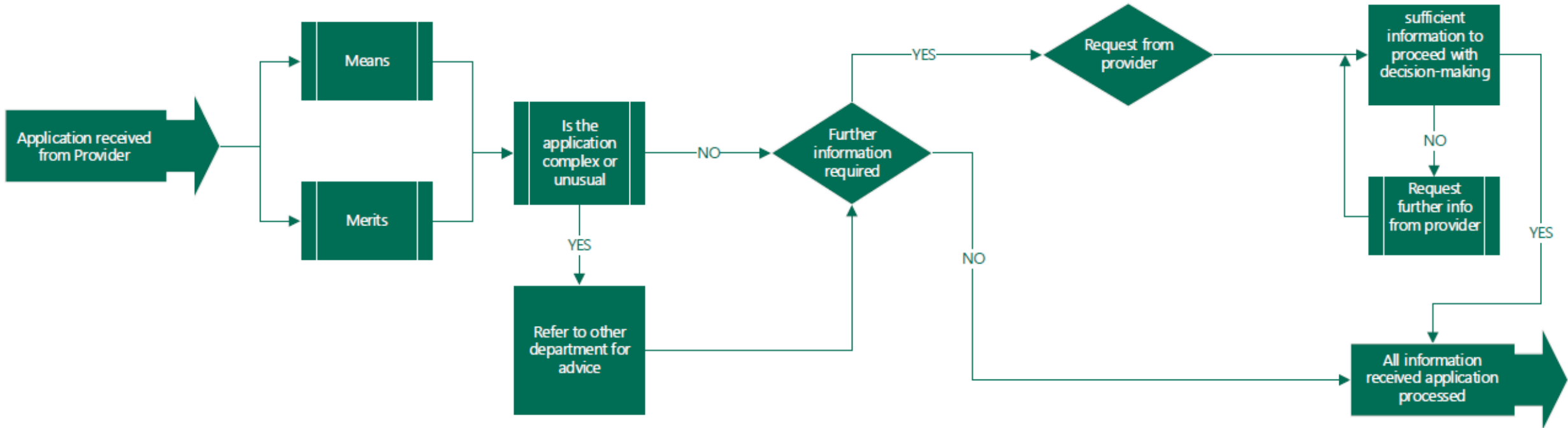
Section 1: Civil Applications

Please note that we are currently reviewing with our Management Information team to see if we can provide data on applications that has not yet been officially published.



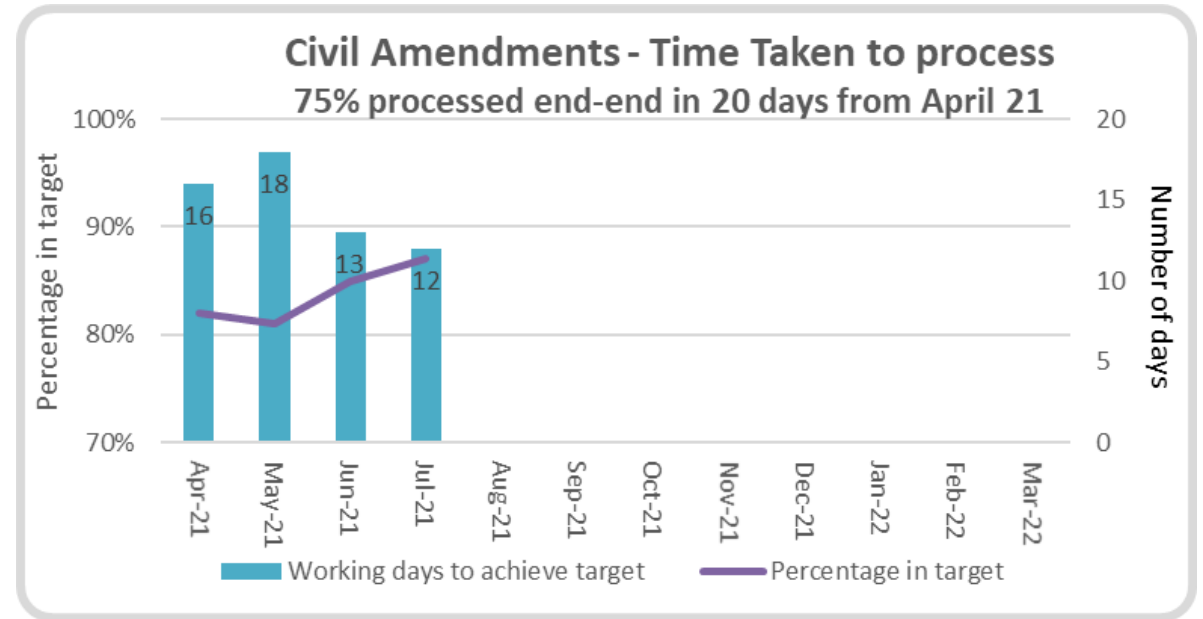
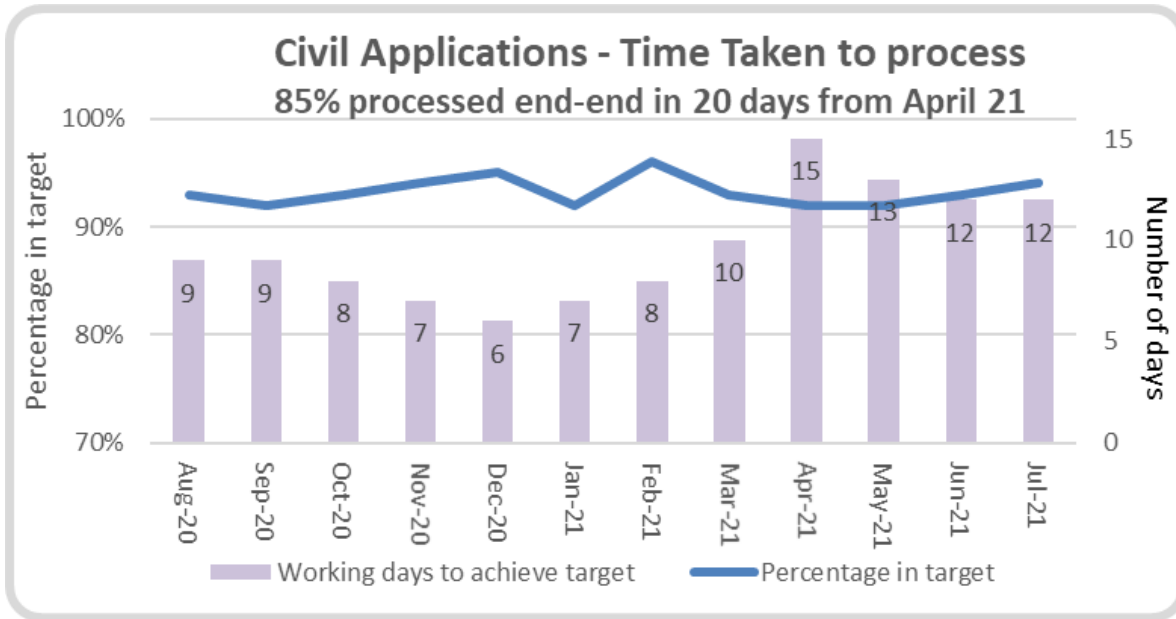
How does our end to end process work?

Please see below a process map, which illustrates how applications are generally dealt with when they come into the agency.



Please note, that the order in which Means and Merits are dealt with can differ. If the application is delegated functions, then the Merits are dealt with first. If it is a substantive application, then the means are dealt with first.

Civil Applications – time taken

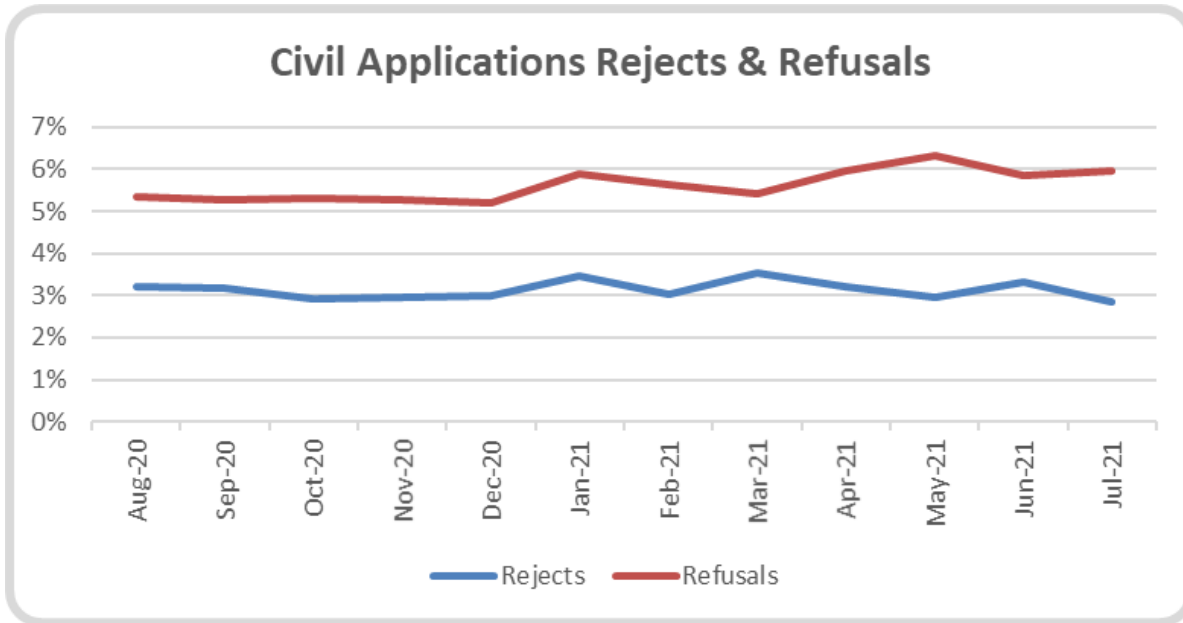


- The target is to process 85% of all applications in 20 working days. This includes all applications (i.e. delegated and emergency)
- End to end time taken for processing applications was at 6 days at the start of the 2020 financial year and increased to 9 days over the summer (due to system issues and annual leave). We saw a further increase in April 21 as the target changed from 75% to 85%.
- We carried out some investigation which has now concluded. We found the majority of cases processed outside 20 working days was due to delays in information being provided. This is an end to end measure and therefore will include time spent waiting for documents from Providers..

- New target from April 2021.
- The target is to process 75% of all amendments in 20 working days.



Civil Applications – Rejects & Refusals



Overall, we grant 90% of applications and we refuse 5%. The other 3% are withdrawals/rejects for further information or declines of funding from the client. The remaining 2% are where the provider has asked us to withdraw the application.

Civil Application fixer queries

July – August 2021

Number of queries down from the previous two months, although this does cover a period when most people take leave so to be expected.

18 queries submitted; 17 Merits, 1 Means

- **11 were accepted as fixer issues** and dealt with by the team
- **7 were not fixer queries** as the LAA had not made an error. Advice still given to provider on what they needed to do.

Fixer and Claim fixer communication still in development to be shared in the next bulletin.

Varied error reasons – no notable trends due to low volumes. Caseworkers involved have all been fed back to.

*Fixer is an email service used by providers where they feel an error has been made by the LAA.

**Merits and Means info combined this time due to low volumes of Means queries.

Guidance, Hints & Tips:

Help us consider your merits application in full by;

Non molestation orders – if you have uploaded the statement to court and it doesn't detail any recent police involvement then please provide the information regarding this in the merits report or on a separate document. We have to ensure paragraph 10.29 of the Lord Chancellors guidance is complied with.

SCA certificates and deprivation of liberty under inherent jurisdiction – if an application is made for a deprivation of liberty order under the inherent jurisdiction of the high court and this is to be heard within ongoing care proceedings, then this can be added to the existing SCA certificate. This can be done by adding a hearing limitation and free-typing the proceeding wording. If it is timetabled separately from care proceedings then a means and merits application for inherent jurisdiction application must be submitted.

Part 1 injunction Anti-Social Behaviour Crime and policing act – applications for representation on Part 1 injunction proceedings should be submitted under your residual contract and NOT housing. Please select the nuisance matter type.

Committal – funding for respondents to committal applications is funded under criminal legal aid and not civil legal aid. Applicants for committal and respondents to enforcement applications where liberty is not at stake are funded under civil legal aid.

Appeals to the county court under section 204 Housing Act 1996 – the correct proceeding option to select is 'Homelessness-Housing Act 1996-Housing'.

Article 21 of the Child Abduction and Custody Act 1985 – when representing the applicant and providing a letter from ICACU, please submit via CCMS as a Section 8 Child Arrangement (contact) Order for Full Representation limited to Final Hearing. You can email Peter Reed, Stephen Spittlehouse or Pamela Read to ensure the application is appropriately identified.

Section 37 Reports in Private Law Proceedings – legal aid is available pursuant to Paragraph 1(b) of Schedule 1, Part 1 LASPO. In the circumstances where the Court directs the Local Authority to produce a Section 37 report the client may apply for funding limited to this element of the proceedings. Please select Children – Miscellaneous Proceedings, Represented on s37 Report Application. The application should be limited to s37 Report. If the Local Authority does not bring their own proceedings once the Report has been filed, the legal aid funding will come to an end. If the Local Authority does bring proceedings, the separate appropriate application for legal aid should be submitted.

Housing Possession Proceedings – please ensure a detailed statement of case and all relevant supporting evidence is provided when making an application for representation within possession proceedings. This should include the Particulars of Claim/Claim Form, statement/affidavit in support, any notice to quit/notice seeking possession and the statement setting out details of your client's defence.

Refusals

Top 20 Refusals and Reasons – last 6 months

Refusal Reason	Domestic Abuse	Housing	Pub Law - Fam	Section 8 orders	Grand Total - all refusals
Special reasons - Refusal	10%	2%	2%	11%	25%
Insufficient Information	3%	1%	0%	4%	9%
Evidence of DV doesn't justify funding	1%	0%	0%	4%	5%
Out of Scope - Criteria not satisfied	0%	0%	0%	4%	5%
Means Evidence Non Co-Op - DF	4%	0%	0%	0%	5%
Incorrect Limitation	1%	0%	0%	2%	4%
Cost Benefit (Family)	1%	0%	0%	2%	4%
Out of Scope - Income	0%	0%	1%	1%	2%
Special Reasons	1%	0%	0%	1%	2%
No Attempt to settle	0%	0%	0%	2%	2%
Means Evidence Non Co-Op	1%	0%	0%	1%	2%
Cost Benefit (proportionality)	2%	0%	0%	0%	2%
Prospects of Success - poor	0%	1%	1%	1%	2%
Within the Present Scope	1%	0%	0%	1%	2%
Out of Scope of LASPO Sch 1 Pt1 Excl Pt2	0%	0%	0%	2%	2%
Out of Scope - Capital	0%	0%	0%	1%	2%
Duplicate Case	0%	0%	0%	1%	1%
Premature - still negotiating	0%	0%	0%	1%	1%
No warning letter	1%	0%	0%	0%	1%
No attempt to compromise the issues	0%	0%	0%	1%	1%

Please note that 'special reasons' is a reason generated on CCMS which allows caseworkers to type free text into the box. It is used when none of the pre-set refusal reasons cover exactly what caseworkers want to say. As such, there are many reasons which fall into this category. Caseworkers use the option of free text to explain why exactly we can't grant i.e. what we are lacking.

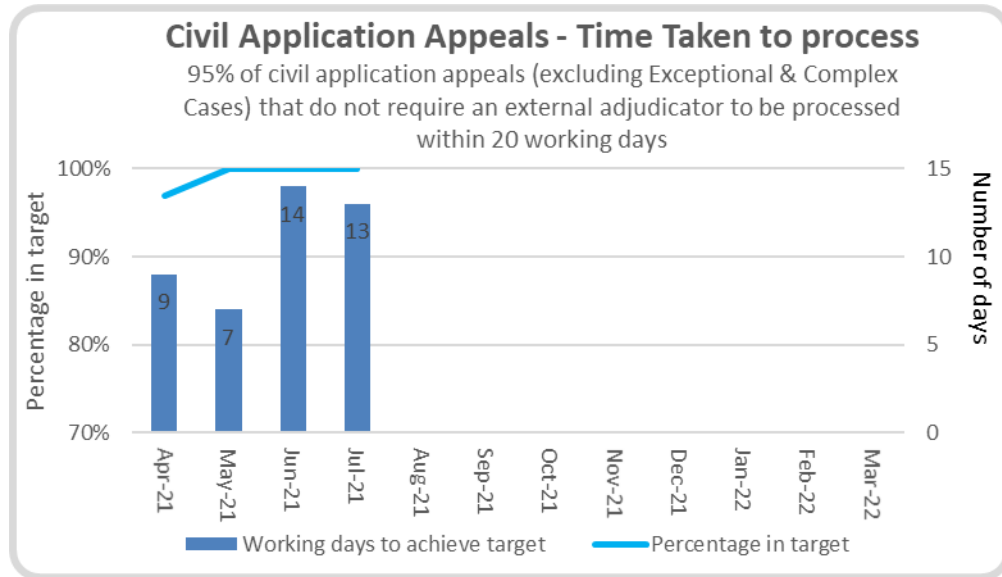
Project underway looking at refusal reasons in CCMS. This will involve reviewing what we currently have and potentially adding more which may be missing. It is hoped this will remove the need to rely on 'Special Reasons' and provide more data around refusals.

Section 2: Legal Appeal Requests

Contains data on legal appeal requests



Civil Legal Appeals Data – Processing target



We are currently investigating a reporting issue, this may impact the chart above.

➤ **Following a review of our data and governance we have tightened up our feedback process when we identify the initial decision to refuse/part-grant funding was incorrect.**

Appeal Feedback for Caseworkers

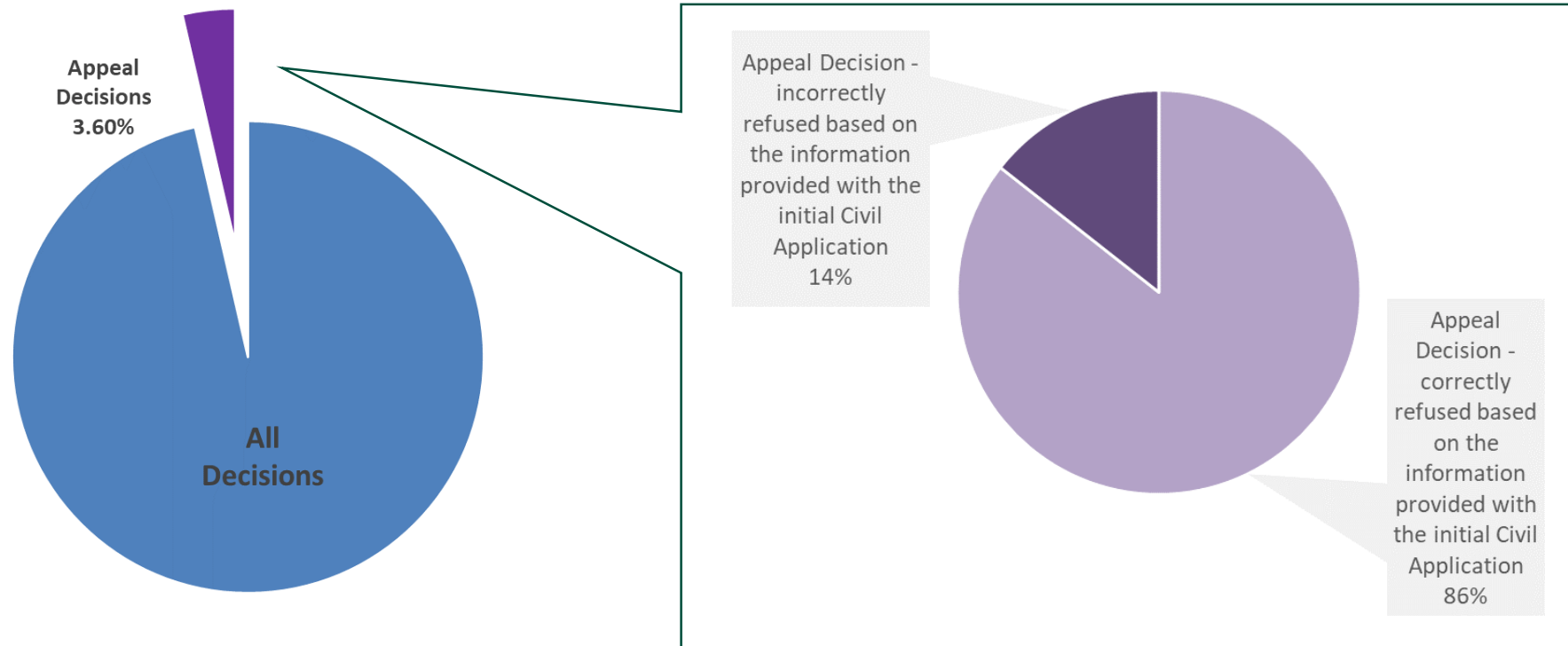
Developed standardised format for capturing feedback

Feedback delivered by Team Managers. Constructive conversation on learning & development to identify where there is a need for additional training and support

Reduce incorrect refusals, allowing us to get it right first time



Legal Appeals Decision data – Initial Caseworker decisions on applications & Independent adjudicator decisions – July/Aug 2021



We received Legal Appeals against 3.6% of total Civil Application decisions made during July and August.

- 3.2% were determined to have been correctly refused based on the information provided with the initial Civil Application
- 0.4% were determined to have been incorrectly refused based on the information provided with the initial Civil Application

As part of our future development of this pack we are exploring how we can better visualise this data to map out the flow of cases through the different stages of the application journey.

Civil Legal Appeals Data – Processing times for Adjudicator referrals only (July –Aug 2021) – Working days

		Internal Review (excluding ECCT and immigration)	Independent Funding Adjudicator
Total Processed		416	46
Decision	Grant	237	15
	Part-grant	26	6
	Refuse	80	24
	Reject	37	0
	Withdrawn	36	1

	Days taken for Adjudicator decision
Average	4.7
Minimum	1
Maximum	18

	Days taken to process IFA referrals in full from date of receipt of original appeal
Average	21.5
Minimum	1
Maximum	63

Appeal that took 63 days was a complex appeal that had multiple requests for information from the LAA and also subsequent submissions of evidence from the provider. This led to substantial delays for the appeal

Breakdown of LAA decision & Adjudicator decision by category of law

Internal Review (excluding ECCT and immigration)

Category of Law	Grant	Part Grant	Reject	Refused	Withdrawn
Children High Court Jurisdiction	3				1
Children Miscellaneous	1			1	1
Community Care	1				
Crime Civil	1				
Divorce, Nullity & Judicial Separation	2			2	1
Domestic Abuse	66	2	6	15	8
Financial - Children	1				
Financial & Property - Matrimonial	13	2	2	5	1
Housing	21	1	2	10	6
Judicial Review	2			1	
Private Law Family	1		1	4	1
Public Law Children	18		3	2	
Residual	3			2	
Section 8	101	21	22	36	17
Special Children Act	3		1	2	
Grand Total	237	26	37	80	36

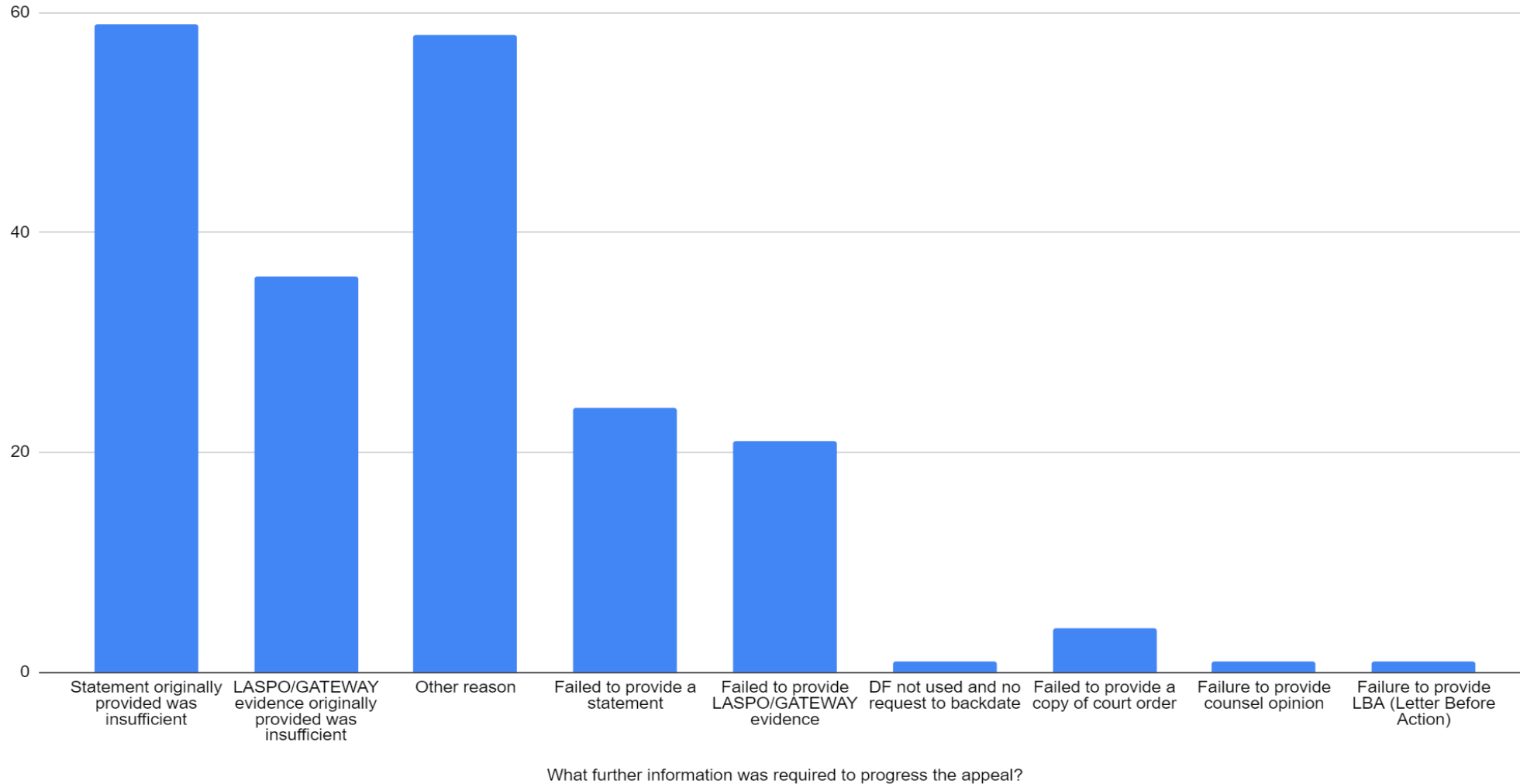
Independent funding adjudicator decision

Category of law	Adjourn – refer to committee	Grant	Part Grant	Refuse
AAP		2		5
Community Care		1		
Housing	1	3	1	3
Immigration				1
Prison Law				1
Private Law Family		8	5	13
Public Law Children		1		1
Grand Total	1	15	6	24

Legal Appeals Decision data – Further information requirements by the LAA

(excluding ECCT and Immigration)

Further information requirements by the LAA to progress the appeal



Legal Appeals Decision data – Further information requirements by the LAA

(excluding ECCT and Immigration)

Sample of “other” further information requirement reasons

- Failure to provide valid reason as to why applications was submitted late on CCMS
- Failed to provide attempts to settle
- Failed to address all issues within the statement
- Failed to provide details re: bail
- Failure to upload appeal representations
- Wrong statement of case was provided
- Needed to confirm date on which LASPO evidence was obtained
- Letter from GP in regard to disrepair case was not provided
- Failure to provide social worker report

Section 3: Civil Means



Top 5 Reject Reasons

1. Passported/non-passported clients – when the means report doesn't tally up with this declaration

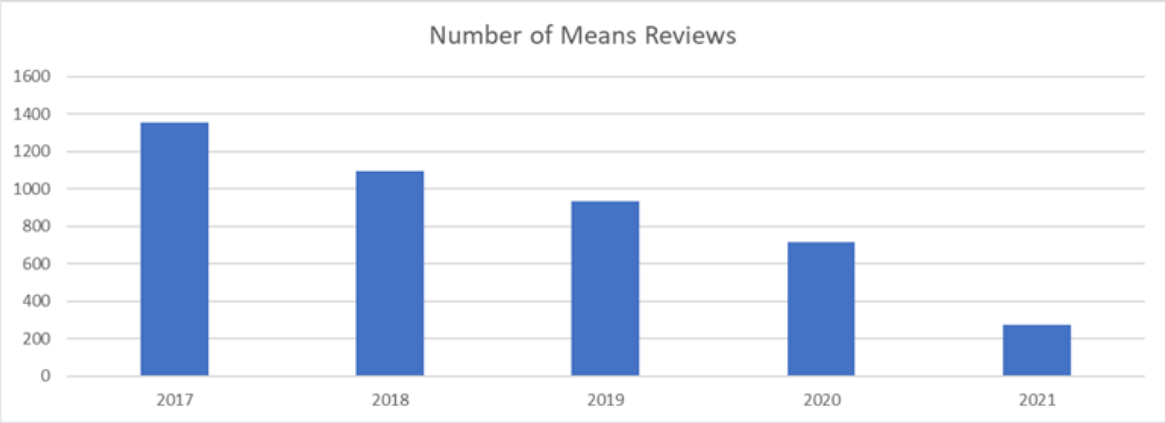
2. Assessment figures by LAA don't tally with the figures outlined in the means report

3. Client self-employed but this isn't detailed in the means report

4. Undeclared partner

5. Undeclared property

Means Reviews



Refusal Reason	2021	%
Disposable Capital	3	2%
Disposable Income	13	8%
Requested information/documentation has not been provided in a reasonable time	9	6%
See additional details	59	37%
Capital assessed / reassessed	29	18%
Income has been assessed/re-assessed and is ineligible	46	29%



Guidance, Hints & Tips:

Help us consider your means assessment in full by;

- 1. Frequency of Wages and/or Benefits** - Entering the wrong frequency for wages or state benefits means your client can appear eligible for funding when this may not be the case. State benefits are usually paid weekly/2weekly or 4-weekly and not monthly. Wages may be paid weekly/2-weekly/4-weekly or per calendar month.
- 2. Childcare** - A child care deduction can be given when the client is absent from home for work or study. We will consider the usual term-time childcare costs and require evidence of the payments made by the client (e.g. receipts/payments evidenced on bank statements).
- 3. Housing Costs** - We require evidence of the current rent/mortgage liability and of the payments made by the client. Please also highlight all corresponding payments on the client's bank statements. If the client pays board and lodgings please provide a letter the person the payments are made to confirming the amount paid and how the payments are apportioned to rent, food, utilities and other incidentals. Please also highlight all corresponding payments on the client's bank statements.
- 4. Passported Applications** - Please ensure the client's name, date of birth and national insurance number are entered accurately as this will affect the result of the benefit check and is one of the main reasons for unconfirmed checks and requests for information on passported applications. If the check is not confirmed a full benefit award letter is required.
- 5. Bank Statements Required** - Bank statements should cover the three months preceding the computation date. Statements need be legible and continuous, have a visible name and account number and show all transactions and balances.
- 6. Explaining Transactions on Bank Statements** - Most further information requests regarding transactions on bank statements relate to credits from unknown sources or transfers to and from undeclared accounts. To reduce further information requests, where possible, please highlight and explain any transactions or transfers on the client's bank statements, particularly when they are;
 - a) Marked with the client's name and/or an account number that does not correspond to any of the declared accounts.
 - b) Regular cash credits or credits from the same source/individual.
- 7. Responses to Further Information requests** - Please ensure all questions are addressed and answered in requests for further information, as failure to do so will result in additional requests and delays in the application process.
- 8. Responding to Tasks and Notifications** - Please amend the task status when replying to notifications, i.e. to documents sent, as it will not return to us until the status is changed. Please note updating a task status to acknowledged will not return the request to us and closes the task.
- 9. Submitting Outcomes – Case Concluded** - As soon as the case has concluded please submit your outcome codes. This will prevent unnecessary requests for a means reassessment and the client may still be paying contributions which may no longer be required. You do not need to wait until the bill is ready to submit.
- 10. Ensuring Your Request is Actioned Promptly** - Please submit the correct task relating to your request, e.g. if a review of the means assessment is required please submit a request means review task. This will ensure the correct team receives the request promptly and will avoid delay.

Section 4: Quality Control



Development of Quality Control Database Better Access to Management Information

We have developed and introduced a new Quality Control Database for our caseworkers

Old Database

- Data held in Excel format
- Reliant on caseworkers manually typing data
- Resulted in difficulties extracting Management Information
- Trend analysis or identification of issues/risks was completed manually

New Database

- Utilising Microsoft applications to capture and store data
- Reduced reliance on free text data to enable more efficient trend analysis
- Management Information easier to extract
- Integration of bespoke reports, which update in real time, to identify trends and issues/risks

What does this mean for you?

- Quicker identification of risks in specific categories of law and types of application
- Improved decision making and reduction in unnecessary requests for information
- Improved development of training materials
- More timely feedback for caseworkers with a focus on a culture of getting it right first time

Section 5: Complaints



Civil Applications Complaints – June & July

Merits 1 st Tier Complaints	June	July	Totals
Complaints Received	11	15	26
Complaints Closed Within KPI	11/11 100%	15/15 100%	26/26 100%
Justified Complaints	5/11 45%	7/15 47%	12/26 46%

Merits Justified Complaints

x7 Delay processing application
 x3 Processing of case/info provided
 x1 Evidential requirements
 x1 Information provided to client

Means 1 st Tier Complaints	June	July	Totals
Complaints Received	6	3	9
Complaints Closed Within KPI	6/6 100%	3/3 100%	9/9 100%
Justified Complaints	4/6 67%	1/3 33%	5/9 56%

Means Justified Complaints

x1 Incorrect offer of funding
 X1 Show Cause letter
 X1 Delay processing application
 x1 Poor communication
 X1 Incorrect refusal

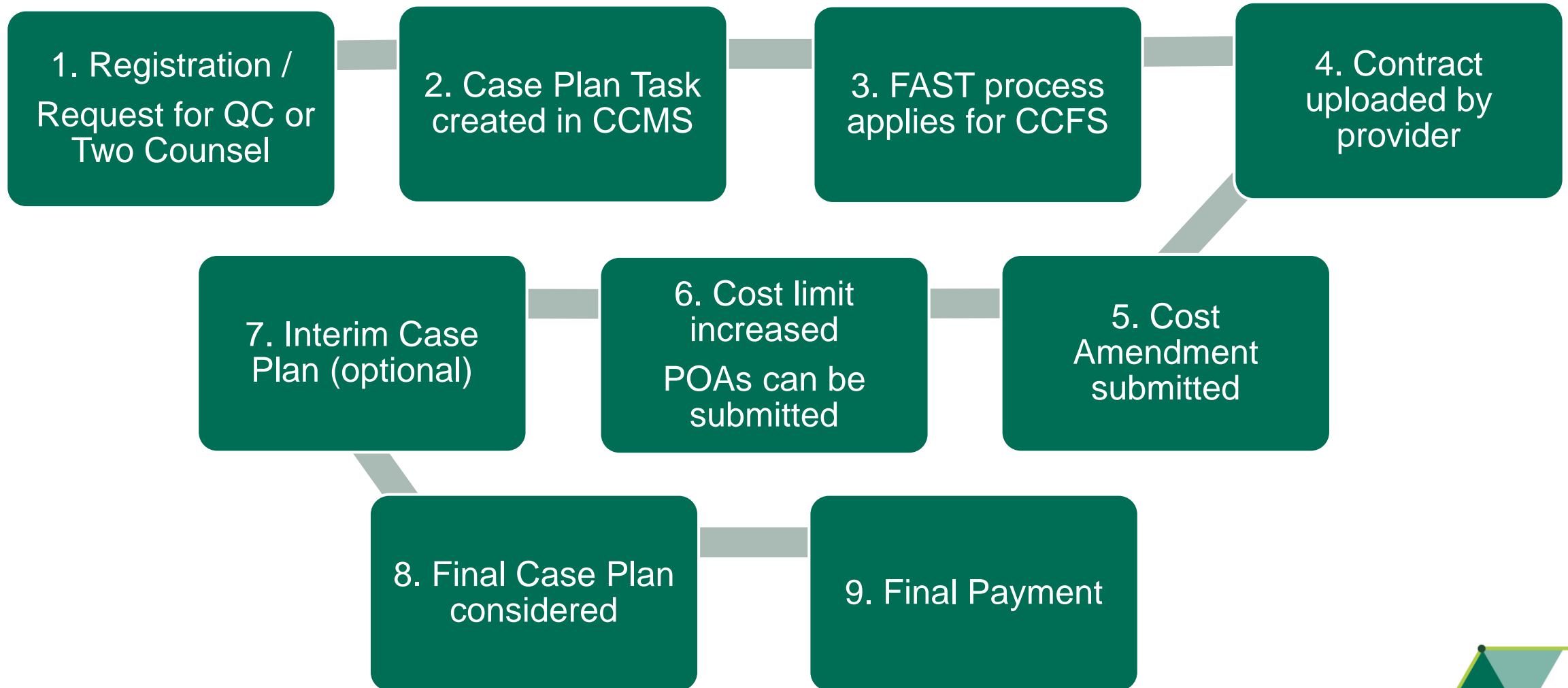
Section 6: High Cost Family

(Previously Very High Cost Cases)

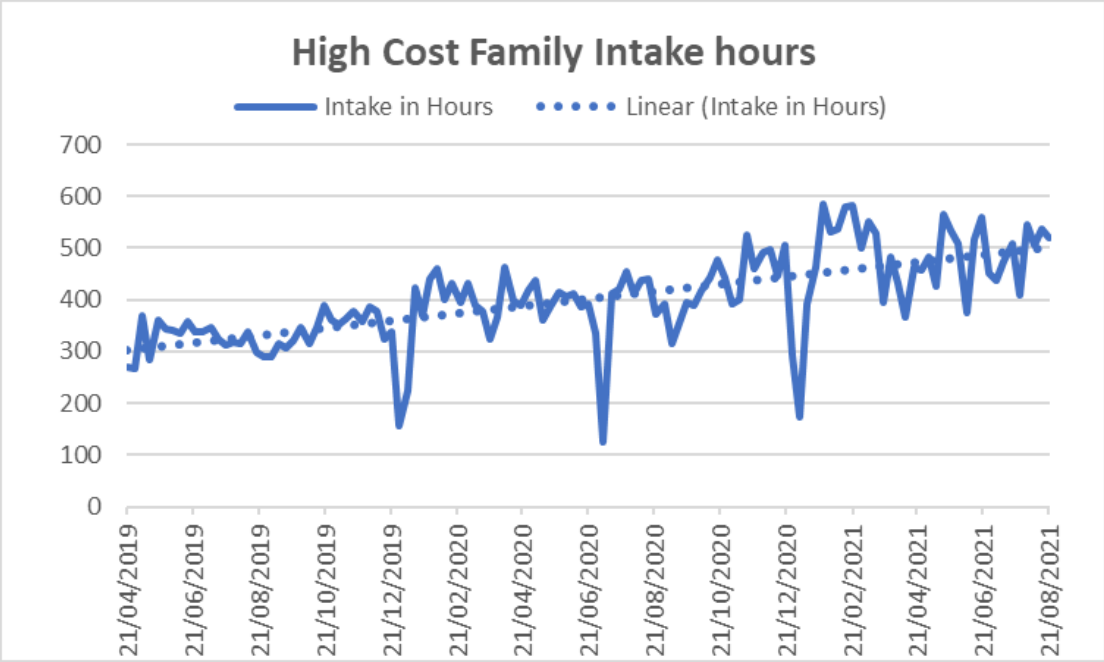
Contains data on intakes, refusals and rejects.



High Cost Family - Simplified Process Flowchart



High Cost Family Performance

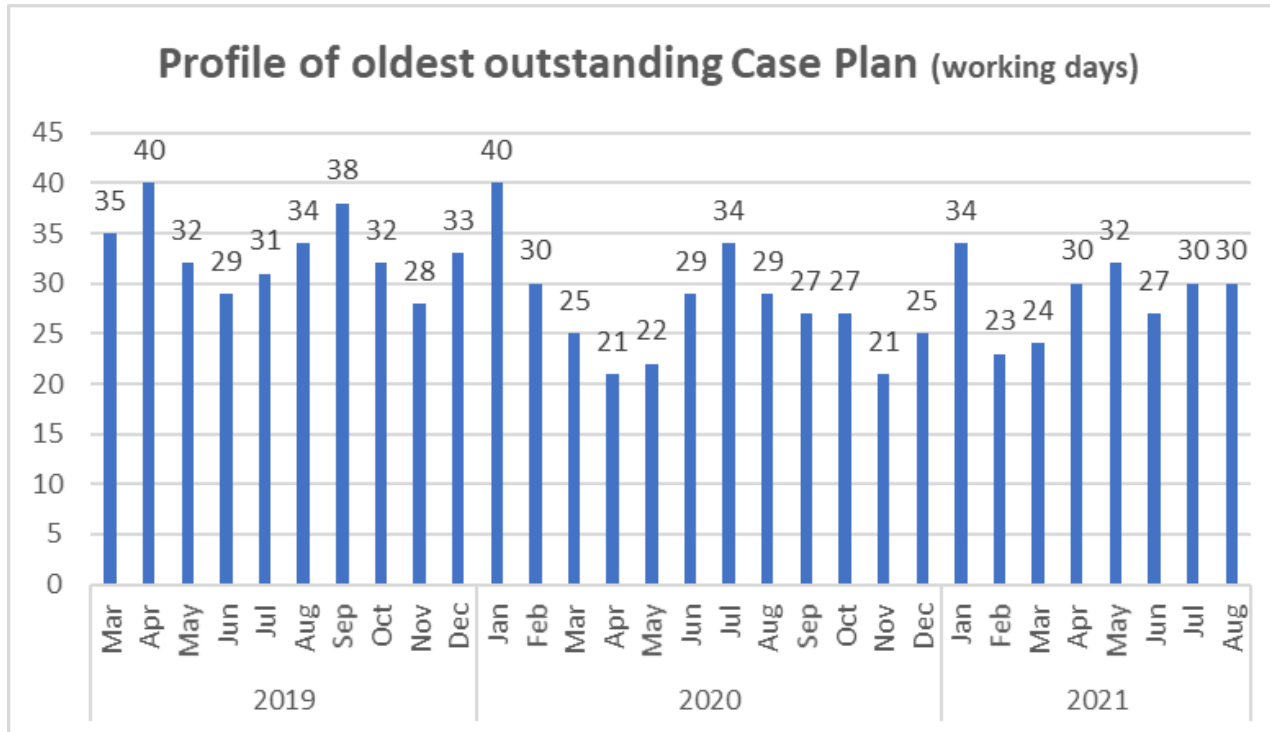


The High Cost Family team reports the position of the oldest items in the WIP backlog on a weekly basis. This is based upon the number of working days since the oldest item was submitted. As a target, the team aims to process 90% of all cases plans within 20 working days of receipt from a provider.

High Cost Family Performance

HCF Recovery Plan

The High Cost Family Team are working their way through a structured recovery plan, which began in late October 2020. This plan has had to evolve numerous times as a result of an unforeseen and sustained increase in intakes (ca. 33%) and IT issues. To combat the increase in intakes, the team have made use of weekend overtime whilst recruitment has been completed. The new recruits started in June 2021 and sign-off is expected within the next month. We expect to be in target and able to turn around our intakes by the end of November 2021.



Key Progress Points – August 2021:

- ❑ New starters all trained – currently working to consolidate knowledge with sign-off on the horizon for all – expected around October time.
- ❑ Progress in terms of backlog reduction – we’ve moved from 30 days to 28 days.

Ongoing HCF Projects;

- Oldest Cases Review – team reviewing oldest cases in the backlog, seeing what is holding them up with a view to analysing trends and sharing best practice amongst team and providers. At present no trends to feedback but team will continue to obtain and analyse data – current data suggests a variety of factors affecting the age of case e.g. complexities and a delay in the provider responding to us.
- Increased use of the external feedback tool providers can use to feed back on their experience of case planning through HCF – team are hoping to analyse the feed back and make changes, where possible, to ensure a better level of service.



Top five reasons for rejects:

1. Attendances notes not provided / signed for Advocates Meetings.

2. Incorrect events rates applied to CCFS Case Plans.

3. Under / over run rates claimed incorrectly for CCFS Case Plans.

4. More information needed for counsel fees on traditional hourly rates case plan.

5. Expert fees found to be higher than expected for work being undertaken.

Why can High Cost Family Case Plans take so long to agree?

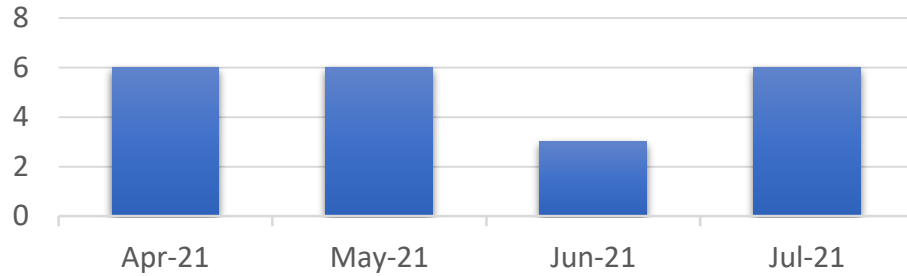
The complexities of a High Cost Family case means that no two are necessarily the same. This means each has to be considered and assessed on an individual basis, and unusual circumstances may mean additional information needs to be provided.

It is also important to note that the High Cost Family Team can only control their own response time.

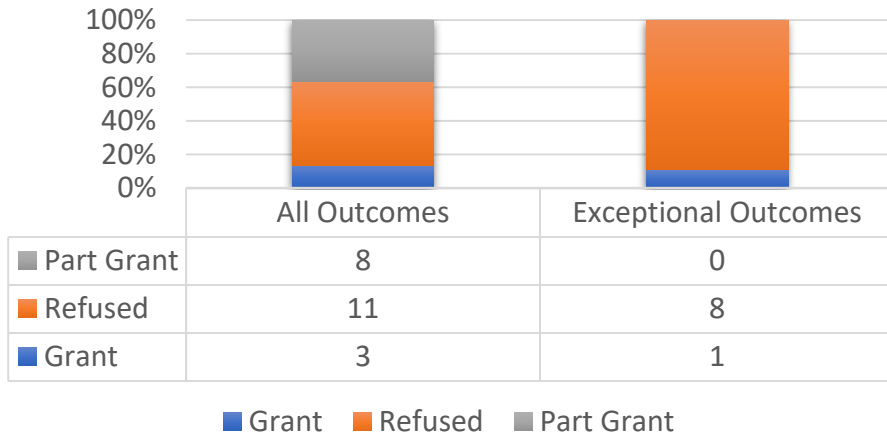
If a provider takes longer to reply, this will naturally have an impact on the length of time until a contract is fully agreed.

High Cost Family Appeals

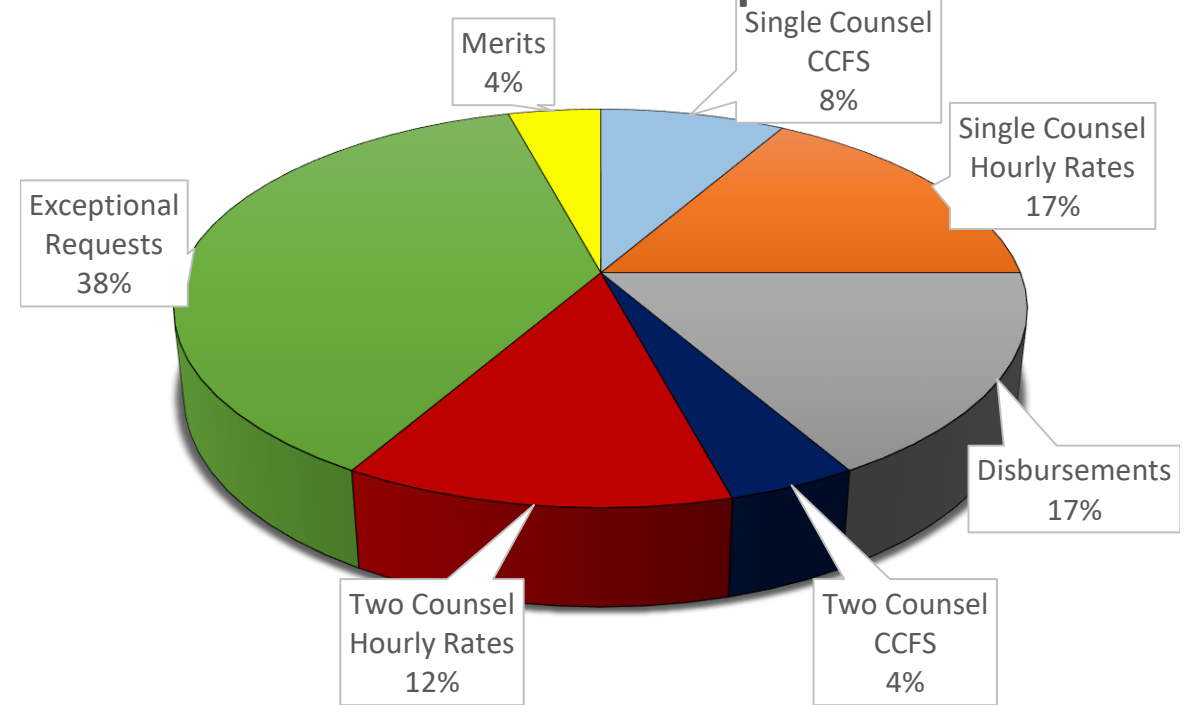
High Cost Family ICA Appeals – Number of Referrals



High Cost Family ICA Appeals – Outcomes Apr to July 2021

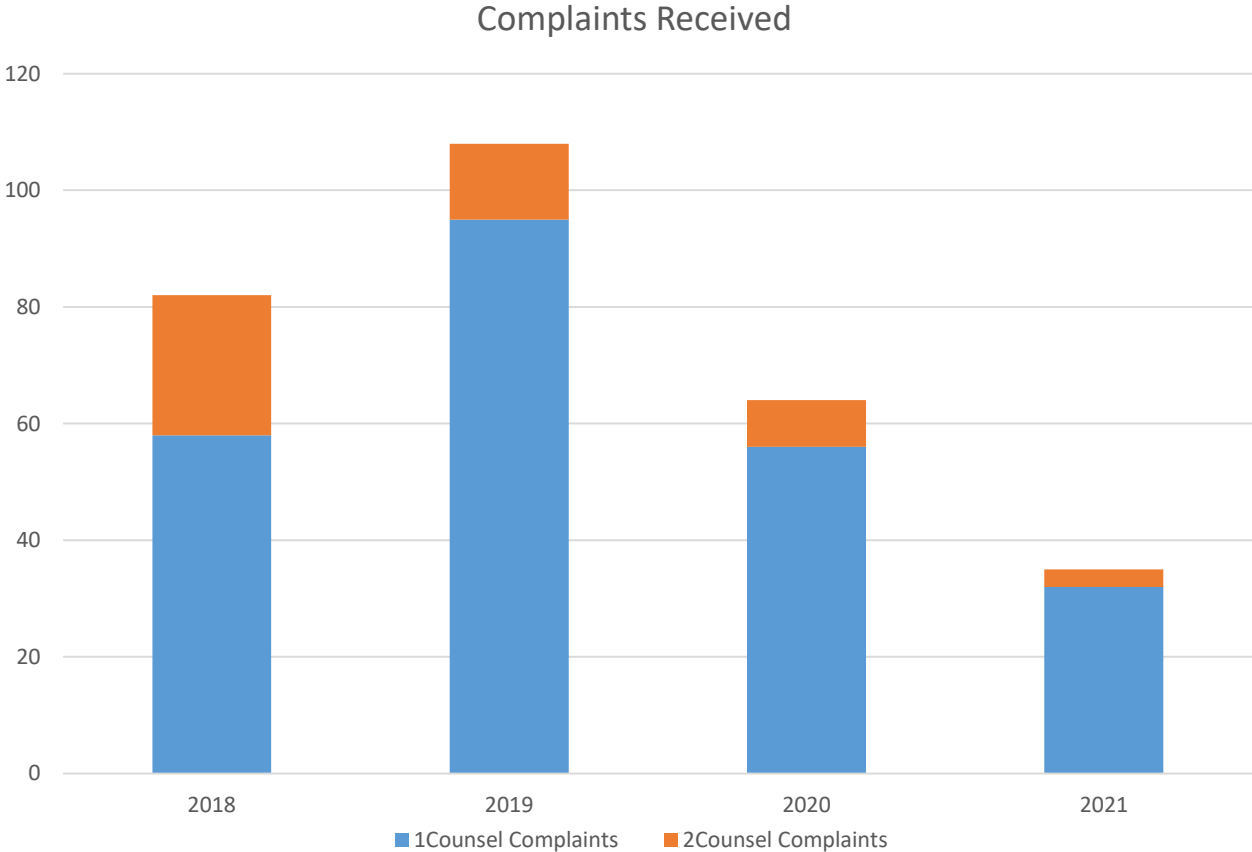


High Cost Family ICA Appeals - Referral Reasons Apr to Jul 2021



The most common reason for referrals to the ICA relates to exceptional requests, so cases where there is a possibility the complexity warrants the use of hourly rates, rather than CCFS rates.

High Cost Family Complaints



The team has received 35 complaints since the start of 2021. Overall complaints received about HCF work have declined since 2019.

Out of the 35 complaints we have received for 2021 so far, all have been responded to, with 10 being justified. There are no decipherable trends from the data the team has gathered. Reasons vary from specific stages of a case plan not being considered, issues with using the CCFS (Care Case Fee Scheme – fixed fee scheme for payment of provider attending ‘events’ e.g. court hearings, advocates meetings) rather than hourly rates and problems using CCMS. The latter is often due to providers using the incorrect route to submit work. We are hoping to address this with training videos and webinars planned for later in the year



Section 7: Future Development of Slide Pack



Future Information:

- **Return Rate Tool**

We have developed a new tool which provides improved data on the return rate of civil applications and amendments. In addition to rejects and refusals, we will be able to track the number of document requests and gain better insight into the number of interactions between the LAA and Providers. With a continued focus on getting it right first time, we will review the profile of caseworker and Provider return rates, using the data to identify measures we can take to reduce the number of interactions.

- **Feedback**

We are keen to hear your thoughts on whether this pack is giving you what you need, is there anything more that you would like to see?



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KPI
1B

EXCEPTIONAL & COMPLEX CASES

A

		PUBLISHED KPIs												
Measure	Targets for 2021/22	Sept-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	YTD 21/22
1	ECCT Applications Process (end-to-end) 80% of Exceptional and Complex Case Applications and Emergency Applications in 25 working days	81%	76%	81%	85%	80%	84%	85%	81%	82%	83%	82%	86%	83%
2	ECF Applications Process 90% of Exceptional Case Funding applications in 25 working days, excluding urgent apps (caseworker time only)	91%	92%	95%	91%	89%	92%	90%	82%	85%	86%	94%	88%	87%
Total Measures Met		2	1	2	2	1	2	2	1	1	1	2	1	1
Total Measures		2	2	2	2	2	2	2	2	2	2	2	2	2
RAG Rating		G	A	G	G	A	G	G	A	A	A	G	A	A

ECCT has continued to use overtime to maintain the position in July and August, expecting this to halt with the reduction in planned leave. Recruitment and training plans are being reviewed and forming part of the team's Winter planning. The team is further developing Continuous Improvement activities to maximise casework resource across the team and provide an improved service to end users.

End-to-end measurements are recorded from the date of first submission through to the date the application is completed.

Caseworker time measurements are recorded in the same way, but exclude time the application is 'on hold' while awaiting further supporting information.

KPI
1B

EXCEPTIONAL & COMPLEX CASES

SHADOW KPIS

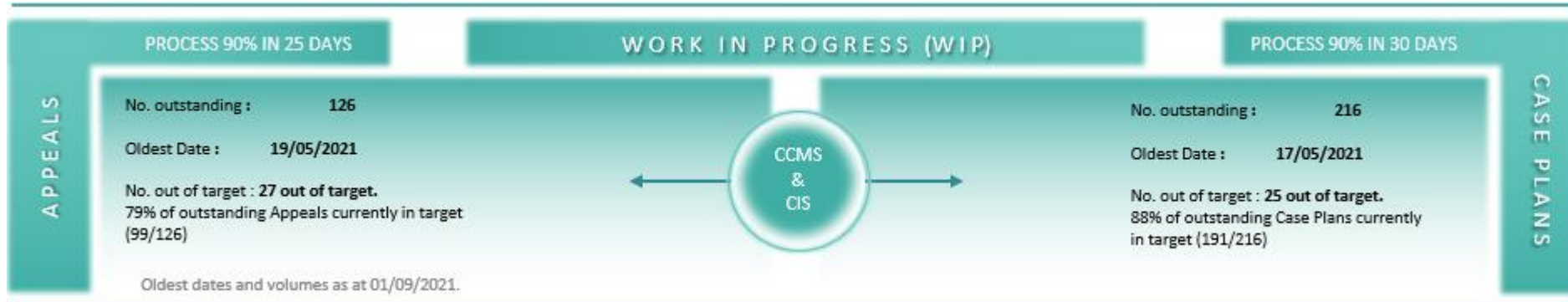
Measure	Targets for 2021/22	Sept-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	YTD 21/22
ECF Urgent Applications	Process 90% of Exceptional Case Funding urgent applications in 10 working days (caseworker time only)	85%	84%	78%	86%	82%	77%	82%	54%	80%	83%	78%	94%	78%
ECC Amendments	Process (end to end) 90% of ECC Amendments within 25 working days	83%	83%	81%	80%	73%	79%	84%	77%	71%	74%	73%	83%	76%

ECF Urgent applications are a Shadow KPI measurement as of April 2021. The low volume of items in this category means that a small number of applications out of target have significant impact on percentages. The average time taken in July 2021 was 7 days, and in August 2021 the average time taken was 6 days.

Shadow KPIs were predicted to be out of target for July and August 2021 as ECCT has focused on new applications and progressing the oldest, more complex cases.

KPI
1B

EXCEPTIONAL & COMPLEX CASES

Issues impacting performance August 2021

High volume of training, particularly relating to the induction of a new member of the team.



Legal Aid
Agency

Civil Billing Operational Performance

The contents of this pack have been created by local operational teams and may vary from official statistics due to the method and scope of data collection. It is intended to give an overview of current performance, as experienced by the teams. This document should not be released outside of agreed channels of circulation.

Contents

Section 1: Civil Cost Appeals

Contains data on trends for appeals against LAA assessments and assessments overturned with additional information.

Section 2: Civil Bill Rejects

Contains data on return rates for civil claims along with trends on reasons for returning claims and Civil Claim Fix.

Section 3: Civil Bill Intakes & Processing Times

Contains data on how long LAA are spending processing your civil claims

Section 4: Escaped Cases Bills & Cost Appeals

Contains data on bill decisions and assessments for Civil Escaped Cases & Legal Help claims

Section 5: Escaped Cases Bill Rejects

Contains data on rejected bills for Civil Escaped Cases & Legal Help claims

Section 6: Escaped Cases Intakes & Processing Times

Contains data on how long LAA are spending processing your Civil Escaped Cases & Legal Help claims

Section 7: Caseworker Topics

Contains trends on issues being raised by caseworkers

Section 8: Bi-Monthly Top Tips

A summary of the pack's top tips

Section 9: A Spotlight On...

A spotlight on individual teams in LAA

Section 10: Appendices

Contains explanations of key terms and how data is reported.

Notes:



Click on an image to jump straight to the individual section. If printing, right click on your mouse and select **'print'**.



Under the header Page Size & Handling, make sure to select **'shrink oversized pages'** to ensure your printer doesn't cut off any information.

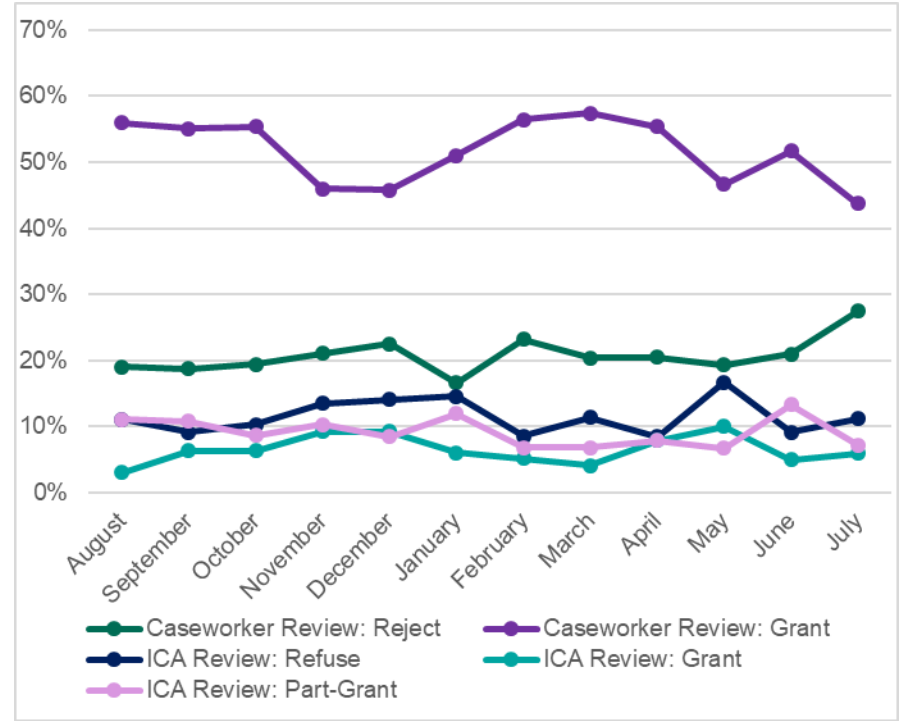
Section 1: Civil Cost Appeals

Contains data on trends for appeals against LAA assessments and assessments overturned with additional information.



Civil Cost Appeals: 12-Month Rolling Decisions Made

Month	Total	Caseworker Review: Stage 1				ICA Review: Stage 2				Outstanding		
		Reject	%	Grant	%	Refuse	%	Grant	%		Part-Grant	%
August	150	28	19%	84	56%	17	11%	4	3%	17	11%	
September	176	33	19%	97	55%	16	9%	11	6%	19	11%	
October	175	34	19%	97	55%	18	10%	11	6%	15	9%	
November	185	39	21%	85	46%	25	14%	17	9%	19	10%	
December	142	32	23%	65	46%	20	14%	13	9%	12	8%	
January	151	25	17%	77	51%	22	15%	9	6%	18	12%	
February	177	41	23%	100	56%	15	8%	9	5%	12	7%	
March	221	45	20%	127	57%	25	11%	9	4%	15	7%	
April	166	34	20%	92	55%	14	8%	13	8%	13	8%	
May	150	29	19%	70	47%	25	17%	15	10%	10	7%	
June	143	30	21%	74	52%	13	9%	7	5%	19	13%	
July	153	42	27%	67	44%	17	11%	9	6%	11	7%	
Total	1,839	384	21%	951	52%	210	11%	123	7%	163	9%	



Data Note:

- ❖ Appeals Data as of 06 July 2021
- ❖ For an explanation of terms, please refer to [Appendix 2: Appeals Explanation](#)

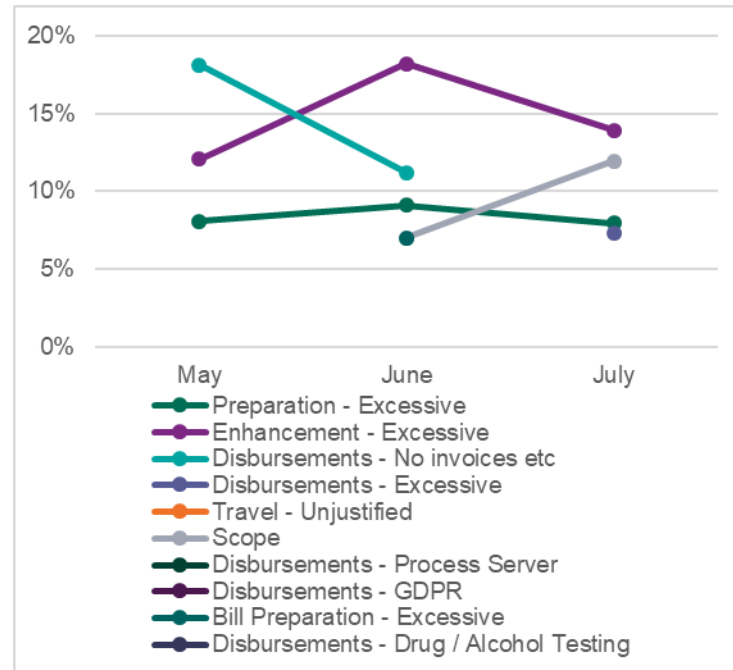
Civil Cost Appeals: 3-Month Rolling Reasons For Assessment And Appeal

May	Volume	%
Disbursements - No invoices etc	27	18%
Enhancement - Excessive	18	12%
Counsel (hourly rate) - Excessive	12	8%
Preparation - Excessive	12	8%
Cost Limitation	8	5%

June	Volume	%
Enhancement - Excessive	26	18%
Disbursements - No invoices etc	16	11%
Preparation - Excessive	13	9%
Bill Preparation - Excessive	10	7%
Scope	10	7%

July	Volume	%
Disbursements - Rates	26	17%
Enhancement - Excessive	21	14%
Scope	18	12%
Preparation - Excessive	12	8%
Disbursements - Excessive	11	7%

Year to date	Volume	%
Enhancement - Excessive	245	13%
Disbursements - No invoices etc	228	12%
Scope	174	9%
Preparation - Excessive	166	9%
Disbursements - Excessive	113	6%



The Caseworker View:



“I recently had a case where I had reduced a claim incorrectly, it was in relation to a drug testing fee. The evidence was listed in the bundle sent to us, but I unfortunately missed it. I had been looking for 4 words in a 104-page bundle: a small needle in a haystack!”

It would have been really helpful, given the size of the bundle, if the relevant bit had been highlighted. That is extra work upfront, but I wouldn't have missed it and the provider could have been paid first time. That would have saved both them and us the time we all had to spend with the appeal.”

Data Note:



- ❖ Percentage figures provided reflect the volume of assessments for that month, rather than the full population of work for that month.
- ❖ The graph opposite charts the top 5 assessment reasons per month only.

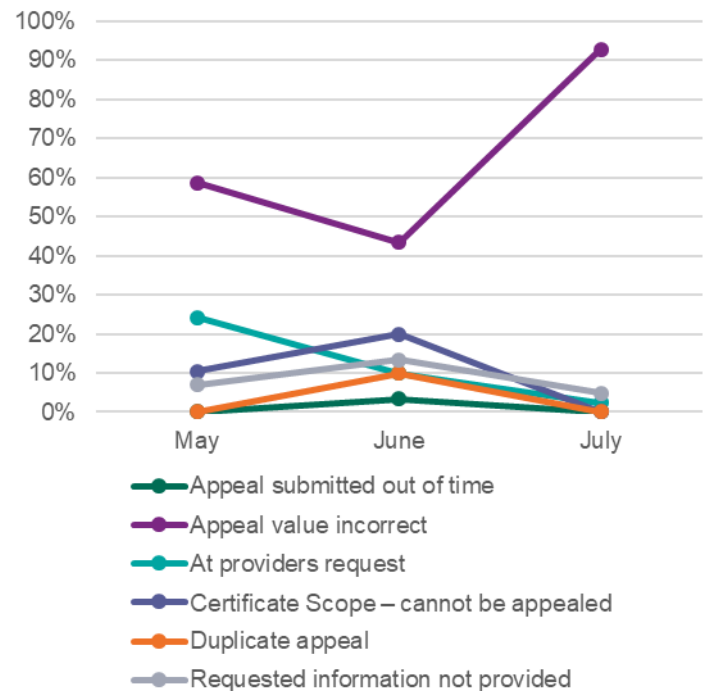
Civil Cost Appeals: 3-Month Rolling Appeal Bill Rejections

May	Volume	%
Appeal value incorrect	17	59%
At providers request	7	24%
Certificate Scope – cannot be appealed	3	10%
Requested information not provided	2	7%
Appeal submitted out of time	0	0%

June	Volume	%
Appeal value incorrect	13	43%
Certificate Scope – cannot be appealed	6	20%
Requested information not provided	4	13%
At providers request	3	10%
Duplicate appeal	3	10%

July	Volume	%
Appeal value incorrect	39	93%
Requested information not provided	2	5%
At providers request	1	2%
Appeal submitted out of time	0	0%
Certificate Scope – cannot be appealed	0	0%

Year to Date	Volume	%
Appeal value incorrect	296	76%
Requested information not provided	38	10%
At providers request	23	6%
Certificate Scope – cannot be appealed	19	5%
Duplicate appeal	7	2%



The Caseworker View:



“I still find myself rejecting appeals because they are not drawn properly in CCMS – the provider has just resubmitted the whole bill again. It’s really helpful if they watch the 3-minute training video available online before submitting an appeal. It makes it clear what format the appeal needs to come to us in, which lets us deal with more appeals first time”

Guidance, Hints & Tips



❖ The most common mistake on appeals is that the full claim is submitted again. We only want the Appeal bill to be the value for which you are appeal. If we have reduced a 60 minute attendance on the client to 24 minutes, then you should appeal for 36 minutes. If you are unsure what to do, you can watch this video: [Appeal bills interactive: eLearning Module](#)

Data Note:



❖ Percentage figures are for the % of appeals rejected, not the full population of appeals.

Civil Cost Appeals: Overturned by Independent Caseworker Review

		12-Month Rolling		May		June		July	
Caseworker Decision Reason		Volume	%	Volume	%	Volume	%	Volume	%
LAA Issue	Caseworker Error	136	14%	3	4%	9	12%	8	12%
	LAA Error	2	0%	0	0%	0	0%	0	0%
Provider Issue	Evidence supplied - Disbursement justification	293	30%	32	46%	23	31%	27	40%
	Evidence supplied - Disbursement breakdown	99	10%	12	17%	5	7%	4	6%
	Evidence supplied - Preparation justification	99	10%	6	9%	13	18%	5	7%
	Evidence supplied - Attendance justification	79	8%	4	6%	7	9%	4	6%
	Evidence supplied - File notes	79	8%	3	4%	2	3%	4	6%
	Discretionary Allowance	71	7%	0	0%	8	11%	7	10%
	Evidence supplied - Enhancement justification	55	6%	3	4%	3	4%	2	3%
	Evidence supplied - Travel justification	36	4%	2	3%	1	1%	2	3%
	Cost Limit Issue Resolved	13	1%	4	6%	3	4%	4	6%
	Evidence supplied – Routine Letter/Calls	2	0%	1	1%	0	0%	0	0%
	Total		964						

The Caseworker View:



“Where there is an issue with an expert fee, for example an unusual apportionment of the fee, the police have not issued an invoice, or you are only able to do so due to the age, it may help to avoid delay or reductions to the fee if an explanation can be provided in the narrative or other supporting document.”

Guidance, Hints & Tips



- ❖ Disbursement vouchers are often missing key information, such as addresses experts have travelled from and to. A full breakdown of all the detail we require is published at [Chapter 10.2 of the Civil Finance Electronic Handbook](#).

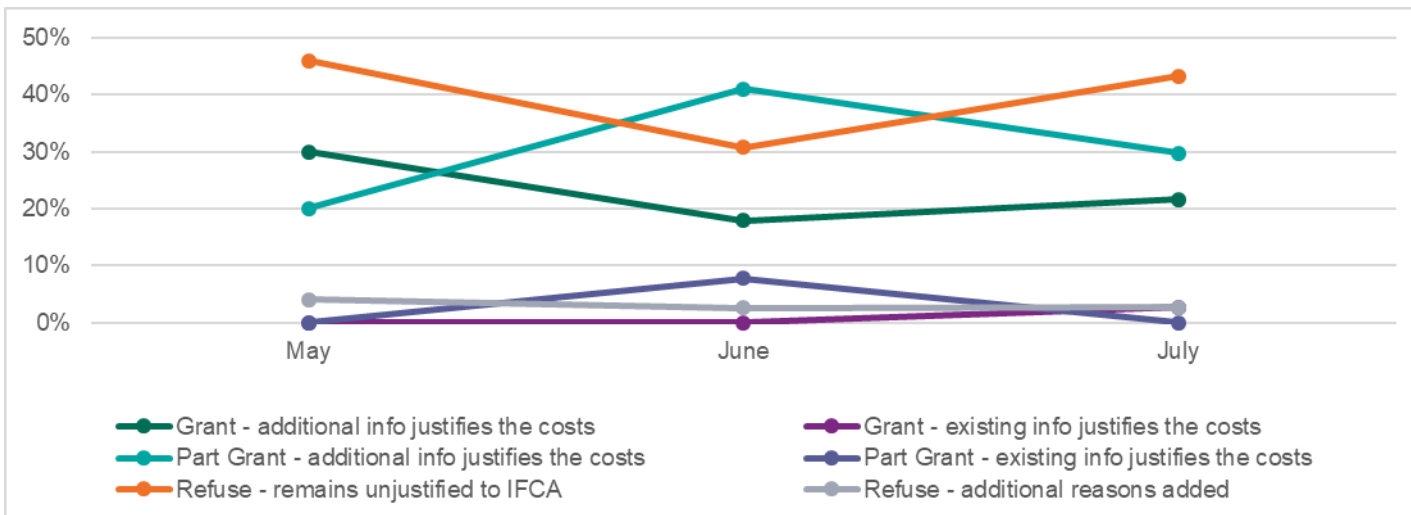
Data Note:



- ❖ Percentage figures are for the % of appeals decided on internal review, not the full population of appeals.
- ❖ For an explanation of terms, please refer to [Appendix 2: Appeals Explanation](#)

Civil Cost Appeals: 3-Month Rolling ICA Decisions

ICA Decision	Year To Date		May		June		July	
	Volume	%	Volume	%	Volume	%	Volume	%
Grant - additional info justifies the costs	99	20%	15	30%	7	18%	8	22%
Grant - existing info justifies the costs	24	5%	0	0%	0	0%	1	3%
Part Grant - additional info justifies the costs	146	29%	10	20%	16	41%	11	30%
Part Grant - existing info justifies the costs	17	3%	0	0%	3	8%	0	0%
Refuse - remains unjustified to IFCA	195	39%	23	46%	12	31%	16	43%
Refuse - additional reasons added	15	3%	2	4%	1	3%	1	3%
Total	496		50		39		37	



The Caseworker View:



“I’d like to reiterate that when solicitors are claiming mileage to court, they must specify which court they travel to. Otherwise we have to go on other evidence available, which may lead to us reducing what might be legitimate travel costs. This would reduce potentially the number of provisional assessments.”

The Caseworker View:



“If a claim has previously been rejected, it is helpful if you can provide a comment explaining any action taken or further evidence provided. This can be in the ‘Message to LAA’ when submitting documents.”

Guidance, Hints & Tips



- ❖ For guidance on the contractual process of a referral to the ICA, please refer to [Chapters 6.71 – 6.81 of the Standard Civil Contract](#)

Data Note:



- ❖ Percentage figures are for the % of appeals decided on by an ICA, not the full population of appeals.
- ❖ For an explanation of terms, please refer to [Appendix 2: Appeals Explanation](#)

Civil Cost Appeals: 12-Month Rolling Time Taken

Month	Provider	Stage 1	Stage 2		Overall Time Taken	
	Average Time Taken To Appeal	Time To Process	Time Out With An ICA	Average Time Taken	Average End to End	Longest Overall Time Taken
August	24	2	7	9	5	28
September	29	4	6	7	7	24
October	33	2	7	8	7	21
November	28	3	7	9	6	37
December	31	3	6	8	5	24
January	34	3	5	8	6	33
February	25	4	6	7	6	19
March	26	2	5	7	4	20
April	31	2	5	7	4	22
May	29	2	4	5	4	23
June	43	2	4	5	4	21
July	23	2	4	5	3	14
Overall	30	3	5	7	5	24

The Caseworker View:



“It would be really useful if the providers could make sure that all the documentation we need is checked and present when the claims are submitted in accordance with our requirements in the LAA Electronic Handbook. It would also be useful if the claims are entered correctly onto CCMS.”

The Caseworker View:



“When uploading multiple documents, it is useful if they can be accurately labelled e.g. including the date for any court orders or invoices. This allows caseworkers to easily navigate the supporting evidence and reduces the likelihood that information will be missed.”

Guidance, Hints & Tips



- ❖ For guidance on the contractual process of a referral to the ICA, please refer to [Chapters 6.71 – 6.81 of the Standard Civil Contract](#)
- ❖ The format of your file of papers can impact how easily accessible information is for caseworkers. Make sure your file is in chronological order and contains all correspondence, orders and attendance notes: <https://www.gov.uk/guidance/model-file-submissions-for-civil-billing>

Data Note:



- ❖ For an explanation of terms, column headers, and how dates are calculated, please refer to [Appendix 2: Appeals Explanation](#)

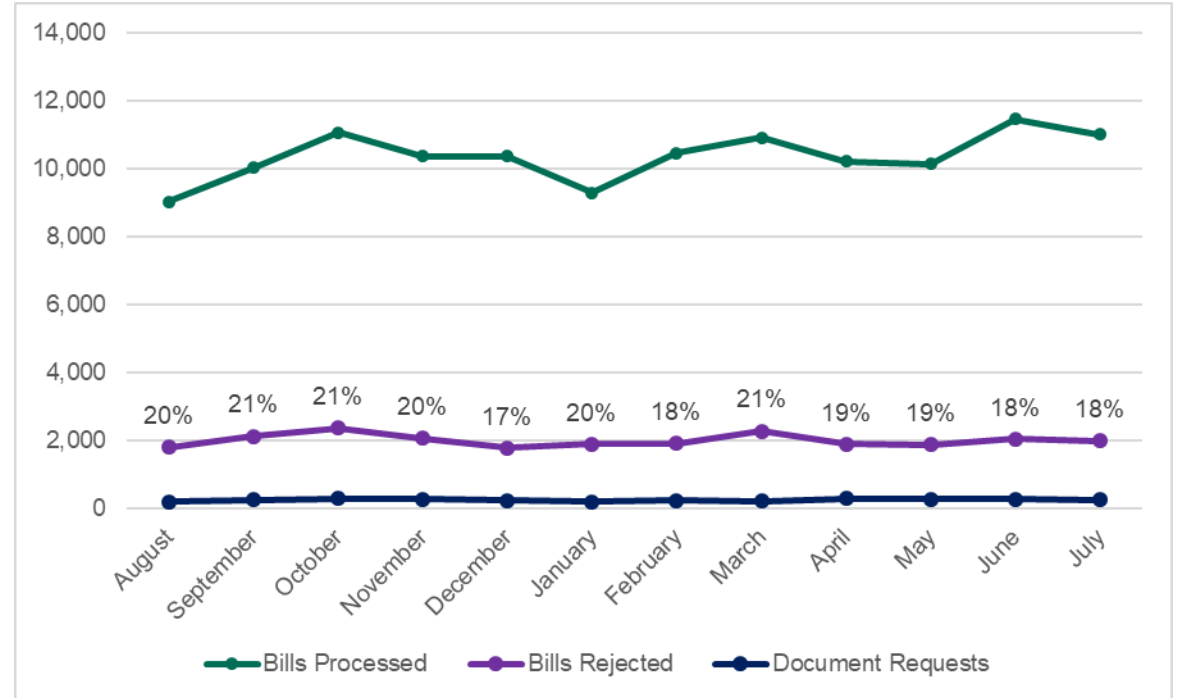
Section 2: Civil Bill Rejects

Contains data on return rates for civil claims along with trends on reasons for returning claims and Civil Claim Fix.



Civil Bill Rejects: 12-Month Rolling Return Rates

Financial Year	Month	Bills Processed	Bills Rejected	Document Requests	Reject Rate	Document Request Rate
2020/21	August	9,014	1,795	210	20%	2%
2020/21	September	10,014	2,132	262	21%	3%
2020/21	October	11,058	2,375	295	21%	3%
2020/21	November	10,362	2,065	279	20%	3%
2020/21	December	10,368	1,776	243	17%	2%
2020/21	January	9,280	1,900	210	20%	2%
2020/21	February	10,457	1,925	233	18%	2%
2020/21	March	10,898	2,282	222	21%	2%
2021/22	April	10,216	1,900	302	19%	3%
2021/22	May	10,137	1,876	270	19%	3%
2021/22	June	11,462	2,042	275	18%	2%
2021/22	July	10,997	1,992	266	18%	2%
Total		124,263	24,060	3,067		



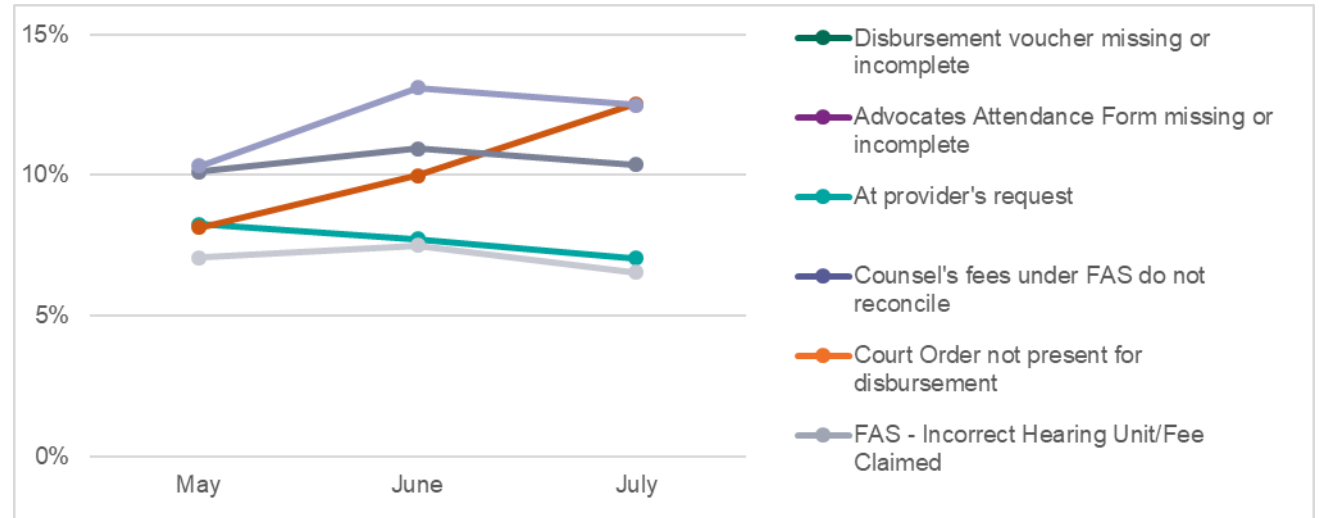
Data Note:



- ❖ As of April 2021, LAA no longer distinguishes between KPI and non-KPI rejects and instead reports the Civil Bill Reject rate as a global position. For an explanation of terms, please refer to [Appendix 3: Rejects & Civil Claim Fix Terms Explanation](#)
- ❖ 'Reject Rate' and 'Document Request Rate' are individual % totals of each processed bill from that month that were either rejected or document requested
- ❖ A document request can be made multiple times on the same bill.

Civil Bill Rejects: 3-Month Breakdown of Reject Reasons for CCMS

May	No. of Rejects	Reject %
Solicitor bill has been submitted without the corresponding claim from counsel	209	10%
Disbursement Voucher detail insufficient	205	10%
At provider's request	167	8%
Disbursement Voucher not uploaded	165	8%
Counsel fees under FAS do not reconcile with costs allocated	143	7%
June	No. of Rejects	Reject %
Solicitor bill has been submitted without the corresponding claim from counsel	285	13%
Disbursement Voucher detail insufficient	238	11%
Disbursement Voucher not uploaded	217	10%
At provider's request	168	8%
Counsel fees under FAS do not reconcile with costs allocated	163	7%
July	No. of Rejects	Reject %
Disbursement Voucher not uploaded	276	13%
Solicitor bill has been submitted without the corresponding claim from counsel	275	12%
Disbursement Voucher detail insufficient	228	10%
At provider's request	155	7%
Counsel fees under FAS do not reconcile with costs allocated	144	7%



The Caseworker View:



“The main issue on rejects for me is disbursements. If providers could make sure that the amounts claimed on the bill match up with what is claimed on the invoice/receipt, it would make life a lot easier and help to reduce the amount of rejects.”

Data Note:



- ❖ Percentage figures are the total of all rejects combined. They do not include paid claims or document requests.
- ❖ The graph only charts recurring reject reasons in the top 5 for a month. In order to be tracked on the graph, the reject reason must be in any 2 of the 3 reported months.

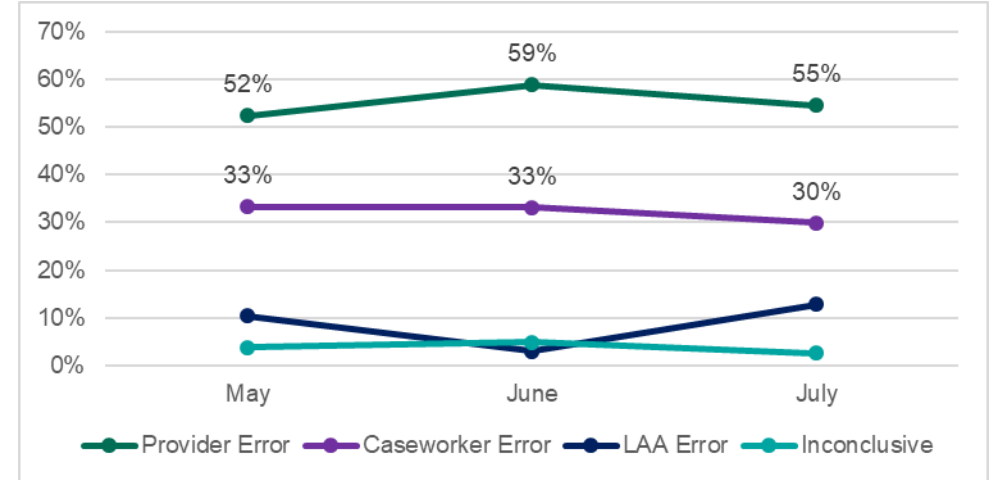
Civil Bill Rejects: 3-Month Breakdown of LAA Civil Claim Fix

	May	June	July
Total Number of Rejects this period:	1,876	2,042	1,992
Total Requests Dealt with by Civil Claim Fix	112	181	204

	Number of Actual Challenges	% of challenges compared to all combined rejects	Number of Actual Challenges	% of challenges compared to all combined rejects	Number of Actual Challenges	% of challenges compared to all combined rejects
Total Number of Provider Challenges	105	6%	163	8%	187	9%
Average Number of Challenges per week	26		41		47	

	Outcome of Challenge	% of Total Challenges this period	Outcome of Challenge	% of Total Challenges this period	Outcome of Challenge	% of Total Challenges this period
Provider Error	55	52%	96	59%	102	55%
Caseworker Error	35	33%	54	33%	56	30%
LAA Error	11	10%	5	3%	24	13%
Inconclusive	4	4%	8	5%	5	3%

	Other Requests Received & Dealt with by Civil Claim Fix		
Provider Query	6	18	17
Internal Referral	1	0	0



The Caseworker View:



“I send a lot of claims back to providers because counsel’s claim hasn’t been submitted yet. It’s really helpful if providers can liaise with counsel when submitting their claim to make sure we get both parts of the submission together. We couldn’t pay an old paper claim if counsel’s fee note was missing and it’s the same on CCMS”.

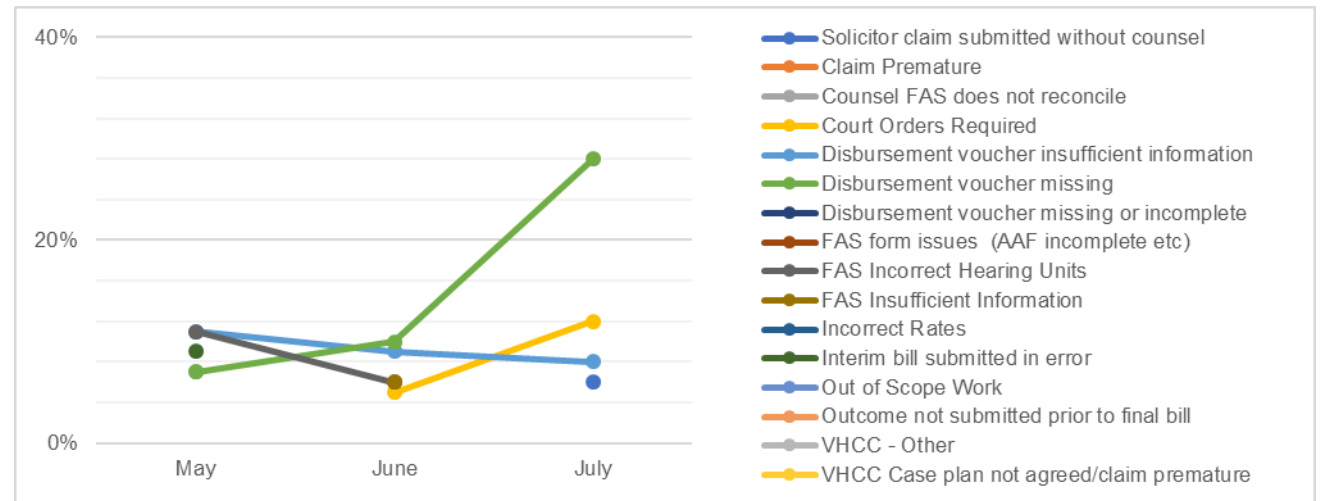
Data Note:




❖ For a definition of LAA categories, and a copy of the feedback loop, please refer to [Appendix 3: Rejects & Civil Claim Fix Terms Explanation](#)

Civil Bill Rejects: 3-Month Rolling Civil Claim Fix Provider Errors


May	No. of Error	Error %
Disbursement voucher insufficient information	6	11%
FAS Incorrect Hearing Units	6	11%
Interim Bill submitted in error	5	9%
Disbursement voucher missing	4	7%
Counsel FAS does not reconcile	4	7%
June	No. of Error	Error %
Disbursement voucher missing	10	10%
Disbursement voucher insufficient information	9	9%
FAS Insufficient Information	6	6%
FAS Incorrect Hearing Units	6	6%
Court orders required	5	5%
July	No. of Error	Error %
Disbursement voucher missing	28	28%
Court Orders Required	12	12%
Disbursement voucher insufficient information	8	8%
Solicitor claim submitted without counsel	6	6%
Interim bill submitted error	6	6%



The Caseworker View:

 “We’ve seen a big upturn in provider errors for disbursement voucher missing challenges, which are all related to the need for Very High Cost Cases (VHCC) claims to have disbursement vouchers uploaded. It would really help if providers could read the news article that went out on this topic. The change is to standardise Civil Bill submissions, which helps us pay more claims first time.

Data Note:

 ❖ Percentage figures are the total of all provider errors as categorised by Civil Claim Fix

❖ For an explanation of terms, please refer to [Appendix 3: Rejects & Civil Claim Fix Terms Explanation](#)

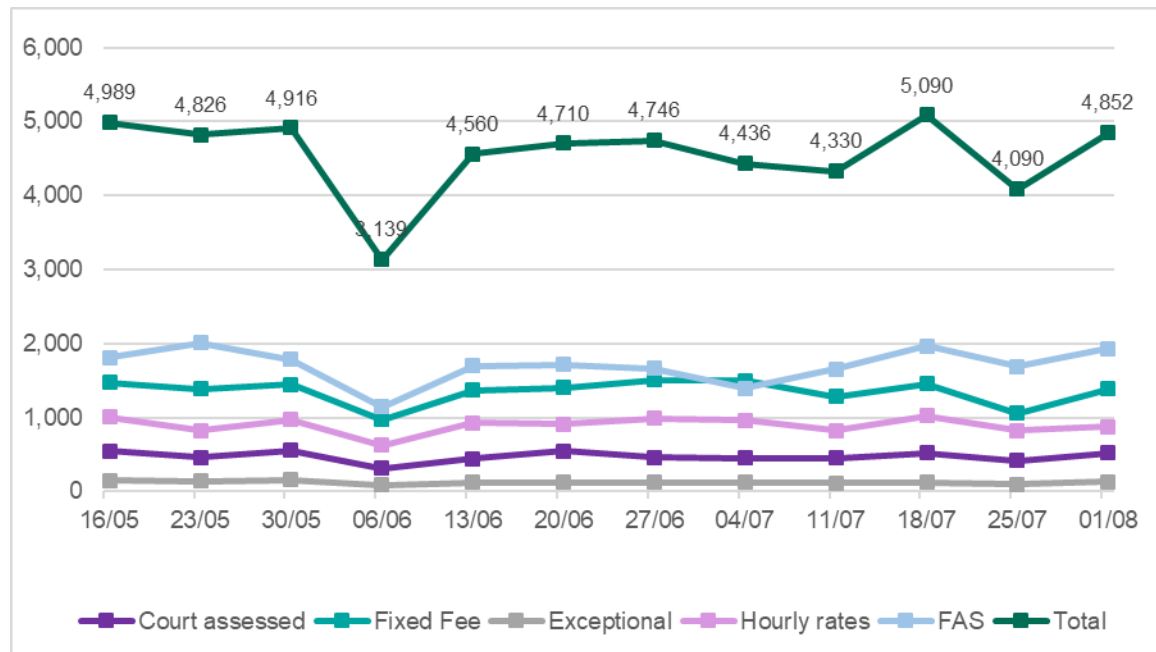
Section 3: Civil Bill Intakes & Processing Times

Contains data on how long LAA are spending processing your civil claims



Processing Times: 12-Week Rolling Civil Bill Intakes

	16/05/2021	23/05/2021	30/05/2021	06/06/2021	13/06/2021	20/06/2021	27/06/2021	04/07/2021	11/07/2021	18/07/2021	25/07/2021	01/08/2021	Average
Court assessed	552	462	555	312	447	549	459	450	452	524	415	526	475
Fixed Fee	1,474	1,383	1,451	972	1,366	1,403	1,510	1,502	1,282	1,458	1,061	1,387	1,354
Exceptional	146	144	155	88	123	124	128	128	114	125	96	134	125
Hourly rates	1,008	829	973	622	926	915	986	964	824	1,020	825	874	897
FAS	1,809	2,008	1,782	1,145	1,698	1,719	1,663	1,392	1,658	1,963	1,693	1,931	1,705
Total	4,989	4,826	4,916	3,139	4,560	4,710	4,746	4,436	4,330	5,090	4,090	4,852	4,557



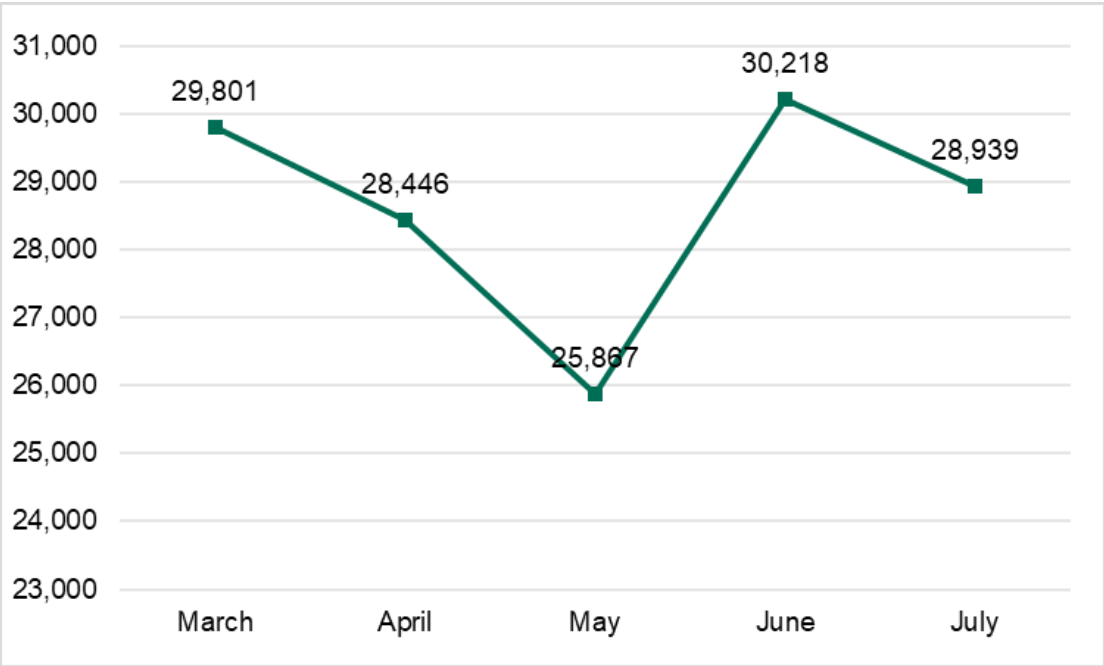
Guidance, Hints & Tips



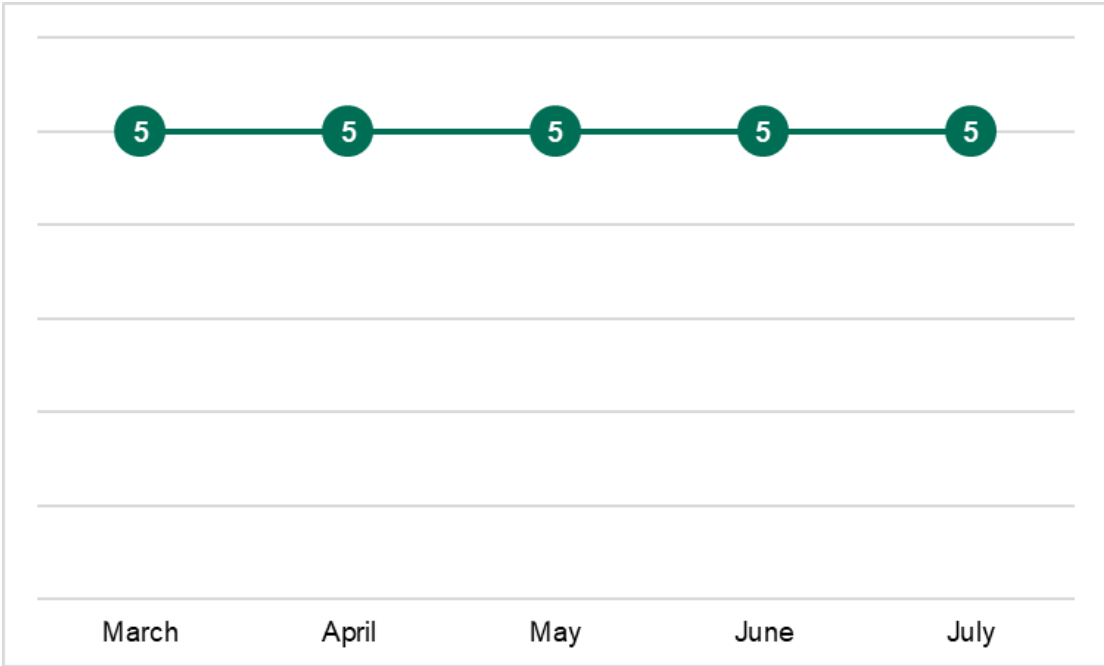
- ❖ **Outcomes:** although CCMS allows you to create your Outcome immediately followed by your claim, it will not release your claim to LAA for processing until your Outcome has been completed. CCMS will keep your claim on hold until we have processed your Outcome. **You can help to avoid delays by ensuring your Outcome is submitted and completed as soon as possible**, so it does not impact on the assessment of your bill.
- ❖ **Counsel:** in non-family cases only, where you have allocated counsel on to your certificate, CCMS will send a notification to counsel once you have created and submitted your final claim. CCMS will then hold your claim for a maximum of 14 days before releasing your claim for processing. If counsel has not submitted their claim and uploaded their documents by this point, we will reject your claim. You can help to avoid delays and claim rejects by liaising with counsel once your bill is submitted to encourage them to do the same.

Processing Times: 5-Month Rolling Civil Bills Time Taken


Total Volume Processed



Processing Days to 90%



Data Note:



- ❖ The **'Total Volume Processed'** table shows the number of claims processed in each month.
- ❖ The **'Processing Days to 90%'** table shows the point at which the local target of 90% in 15 days was reached.
- ❖ For a definition of LAA terms, please refer to [Appendix 4: Processing Explanations](#).



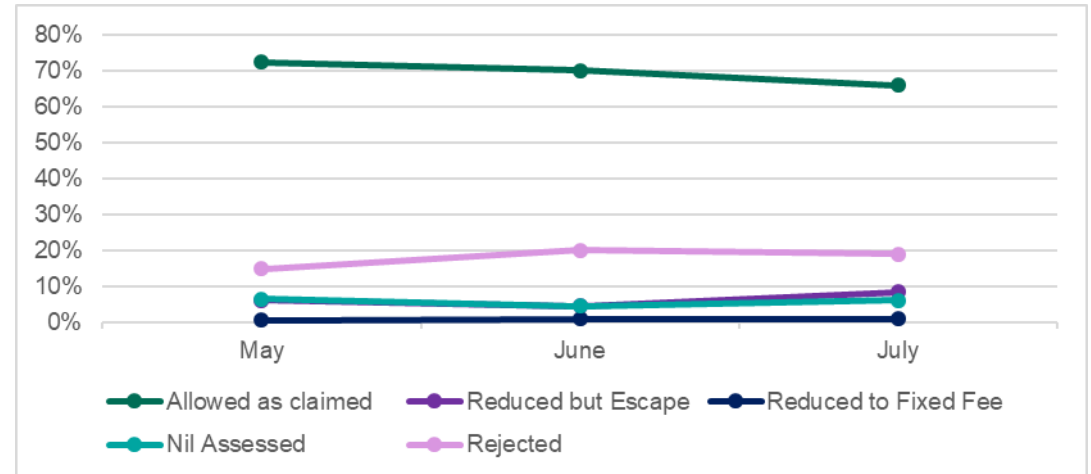
Section 4: Escaped Cases Bills & Cost Appeals

Contains data on bill decisions and assessments for Civil Escaped Cases & Legal Help claims



Escaped Cases: 3-Month Rolling Initial Bill Decisions Made

May	Claims Received	Allowed as claimed	Reduced but Escape	Reduced to Fixed Fee	Nil Assessed	Rejected
Civil	667	512	29	1	53	72
Mental Health	92	76	2	1	1	12
Immigration and Asylum	270	157	31	2	11	69
Totals	1,029	745	62	4	65	153
		72%	6%	0%	6%	15%
June						
Civil	786	566	39	4	46	131
Mental Health	131	105	8	5	0	13
Immigration and Asylum	290	176	7	1	8	98
Totals	1,207	847	54	10	54	242
		70%	4%	1%	4%	20%
July						
Civil	713	469	70	9	51	114
Mental Health	142	108	10	0	3	21
Immigration and Asylum	281	172	15	1	14	79
Totals	1,136	749	95	10	68	214
		66%	8%	1%	6%	19%



The Caseworker View:



"I find that pages 5 and 6 of the Legal Help Form, relating to questions of the clients available capital and income are often incomplete. Also, when telling us about any passported benefits specifically: for example, 'Income Related ESA' and not just a generic confirmation (ESA). Finally, bank statements cannot be used as confirmation of a client's gross wages or their receipt of a passported benefit (with the exception of Income Support and Universal Credit)"

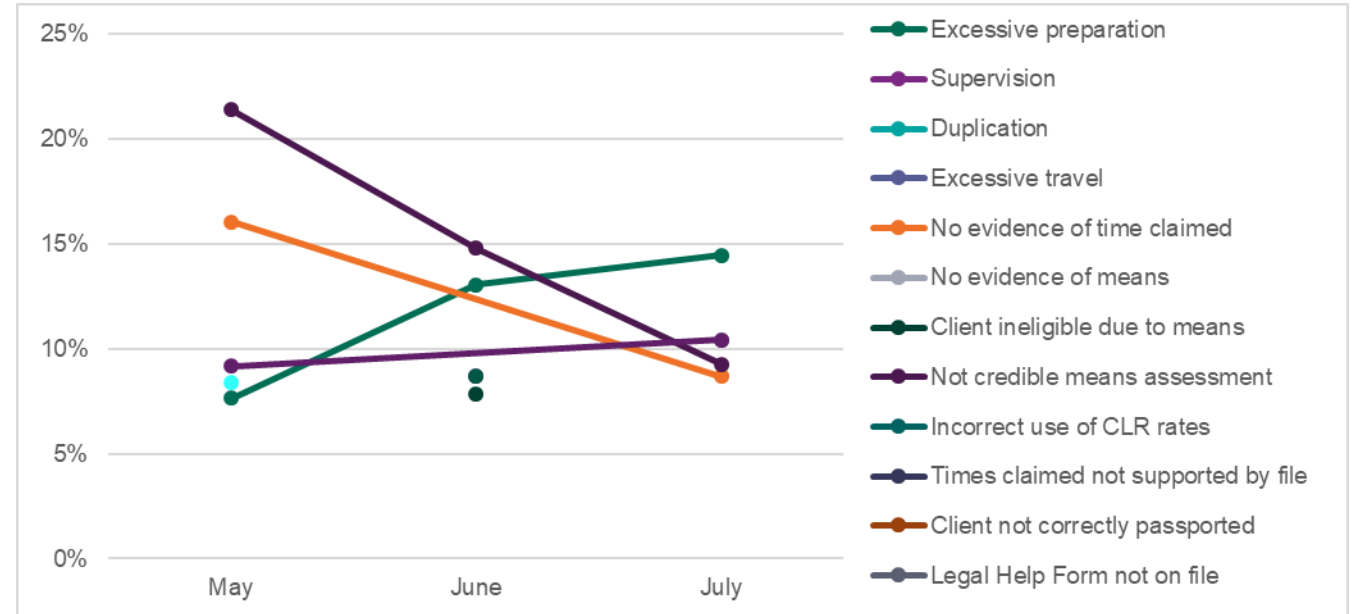
Data Note:



❖ For an explanation of the terms used, please refer to [Appendix 5: Escaped Cases Terms](#)

Escaped Cases: Breakdown of Bill Assessment Reasons – Overall

May	No. of Assessments	%
Not credible means assessment	28	21%
No evidence of time claimed	21	16%
Means assessment evidence provided insufficient	12	9%
Decision reason not given	11	8%
Excessive preparation	10	8%
June	No. of Assessments	%
Not credible means assessment	17	15%
Excessive preparation	15	13%
Out of scope work claimed	10	9%
CW1 form completed incorrectly/not signed	10	9%
Client ineligible due to means	9	8%
July	No. of Assessments	%
Excessive preparation	25	14%
No evidence of means	18	10%
Means assessment evidence provided insufficient	18	10%
Not credible means assessment	16	9%
No evidence of time claimed	15	9%



The Caseworker View:



“Where larger attend/prep times are claimed on your running record of costs, please provide sufficient detail on a file note as to the complexity. Getting this information upfront can be the difference between paying the claim first time or assessing and then overturning on appeal.”

Data Note:



- ❖ Percentage figures are the total of all assessments.
- ❖ In order to be tracked on the graph, the assessment reason must be in 2 of the 3 reported months.

Escaped Cases: Breakdown of Bill Assessment Reasons – By Category

May	Civil		Mental Health		Immigration			
	No. of Assessments	%	No. of Assessments	%	No. of Assessments	%		
Not credible means assessment	23	28%	Excessive preparation	3	75%	No evidence of time claimed	20	45%
Means assessment evidence provided insufficient	10	12%	No evidence of means	1	25%	Not credible means assessment	5	11%
Decision reason not given	8	10%	Supervision	0	0%	Disbursements not reasonable	5	11%
Excessive preparation	7	8%	Duplication	0	0%	Decision reason not given	3	7%
Client not correctly passported	6	7%	Excessive travel	0	0%	Means assessment evidence provided insufficient	2	5%
June	No. of Assessments	%	No. of Assessments	%	No. of Assessments	%		
Not credible means assessment	13	15%	Excessive preparation	8	62%	Not credible means assessment	4	25%
Out of scope work claimed	10	12%	Incorrect use of CLR rates	2	15%	No evidence of time claimed	3	19%
CW1 form completed incorrectly/not signed	10	12%	Times claimed not supported by file	2	15%	No evidence of means	3	19%
Client ineligible due to means	9	10%	Disbursements not reasonable	1	8%	Excessive preparation	2	13%
Means assessment evidence provided insufficient	7	8%	Supervision	0	0%	Decision reason not given	2	13%
July	No. of Assessments	%	No. of Assessments	%	No. of Assessments	%		
Excessive preparation	15	12%	Excessive preparation	5	38%	Excessive preparation	5	17%
Means assessment evidence provided insufficient	15	12%	Decision reason not given	3	23%	No evidence of time claimed	4	13%
Not credible means assessment	14	11%	No evidence of means	2	15%	No evidence of means	4	13%
No evidence of means	12	9%	Out of scope work claimed	2	15%	Means assessment evidence provided insufficient	3	10%
No evidence of time claimed	10	8%	No evidence of time claimed	1	8%	Not credible means assessment	2	7%

Escaped Cases: 3-Month Rolling Appeal Decisions

	Total	Caseworker Review:				ICA Review:				Part-Grant	%	To Complete	
		Reject	%	Grant	%	Refuse	%	Grant	%				
Year to Date	698	39	6%	562	81%	33	5%	25	4%	15	2%	0	
Category													
Civil	494	29	6%	404	82%	26	5%	17	3%	9	2%	0	
CLA	11	0	0%	9	82%	0	0%	2	18%	0	0%	0	
Mental Health	27	1	4%	19	70%	4	15%	0	0%	2	7%	0	
Immigration	152	9	6%	129	85%	3	2%	6	4%	4	3%	0	
3 Month Rolling													
May	64	5	8%	54	84%	3	5%	1	2%	1	2%	0	
June	74	4	5%	58	78%	4	5%	3	4%	4	5%	0	
July	57	2	4%	45	79%	2	4%	2	4%	1	2%	0	

The Caseworker View:



“I see a lot of interpreter invoices where they are claiming for a minimum charge, but there’s no justification for why. We’ve reduced it on assessment, which is then appealed and we get a justification: like there being a scarcity of interpreters for that language. We then reinstate those costs. It is a little bit extra effort upfront, but getting that justification with the original claim would save the effort of having to appeal at all.”

Data Note:



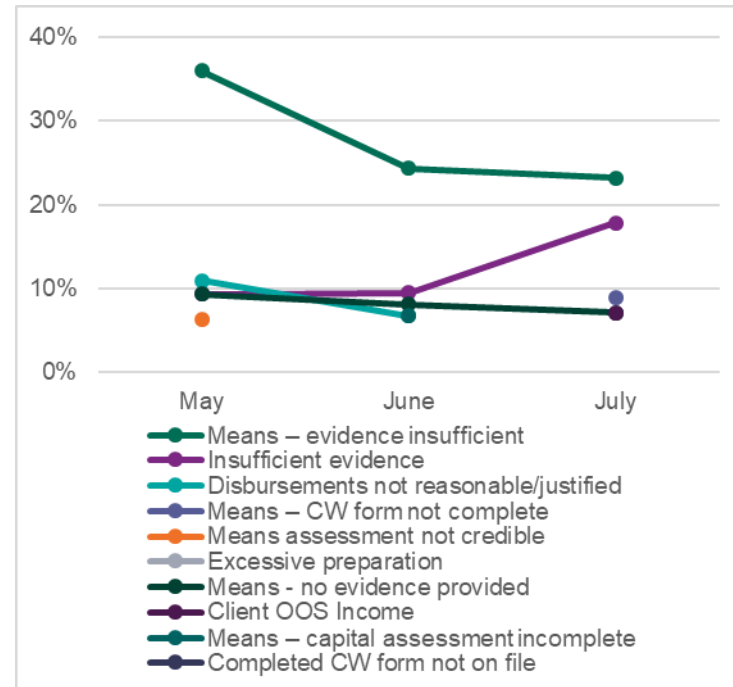
- ❖ Appeals Data as of 06 July 2021
- ❖ For an explanation of terms, please refer to [Appendix 2: Appeals Explanation](#)

Escaped Cases: 3-Month Rolling What is Being Appealed

May	Volume	%
Means – evidence insufficient	23	36%
Disbursements not reasonable/justified	7	11%
Insufficient evidence	6	9%
Means - no evidence provided	6	9%
Means assessment not credible	4	6%
June	Volume	%
Means – evidence insufficient	18	24%
Insufficient evidence	7	9%
Means - no evidence provided	6	8%
Disbursements not reasonable/justified	5	7%
Means – capital assessment incomplete	5	7%
July	Volume	%
Means – evidence insufficient	13	23%
Insufficient evidence	10	18%
Means – CW form not complete	5	9%
Client OOS Income	4	7%
Means - no evidence provided	4	7%

Year To Date	Volume	%
Means – evidence insufficient	192	28%
Insufficient evidence	65	9%
Disbursements not reasonable/justified	59	9%
Means - no evidence provided	55	8%
Means – CW form not complete	41	6%

Nil Assessments (Year To Date)	Volume	%
Means – evidence insufficient	179	40%
Means - no evidence provided	47	10%
Means – CW form not complete	40	9%
Means – CW form not signed	23	5%
Means assessment not credible	22	5%



The Caseworker View:



“Please make sure to check the hourly rates claimed in housing and family cases before submitting your claim. This will help make sure they reflect the correct level of service: where it’s right first time, it means we can get the bill paid quicker, which is good for the provider as well as less work for us.”

Data Note:



❖ Percentage figures provided reflect the volume of assessments for that month/YTD, rather than the full population of work for that month.

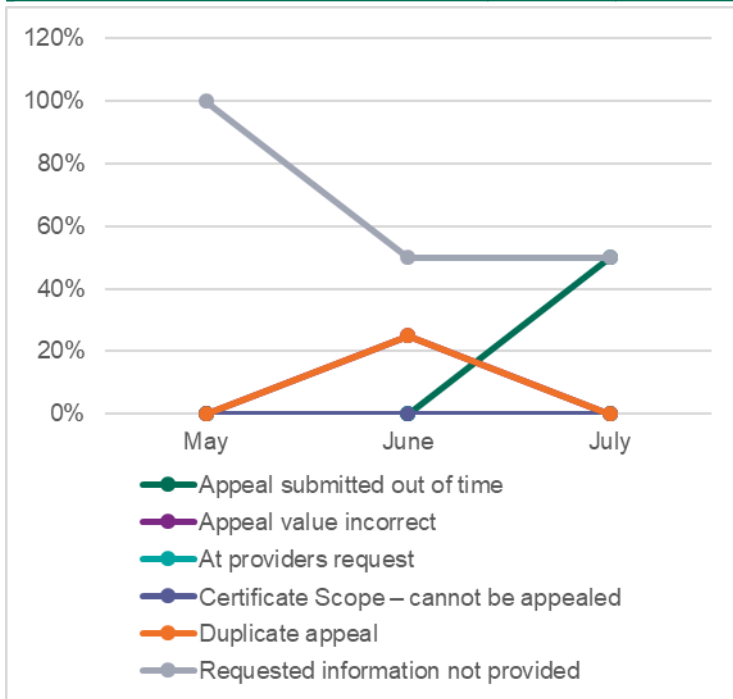
Escaped Cases: 3-Month Rolling EC Appeal Rejections

May	Volume	%
Requested information not provided	5	100%
Appeal Value Incorrect	0	0%
Appeal Submitted out of time	0	0%
Certificate Scope – cannot be appealed	0	0%
Duplicate Appeal	0	0%

June	Volume	%
Requested information not provided	2	50%
Appeal Value Incorrect	1	25%
Duplicate Appeal	1	25%
Appeal Submitted out of time	0	0%
Certificate Scope – cannot be appealed	0	0%

July	Volume	%
Requested information not provided	1	50%
Appeal Submitted out of time	1	50%
Appeal Value Incorrect	0	0%
Certificate Scope – cannot be appealed	0	0%
Duplicate Appeal	0	0%

Year to Date	Volume	%
Requested information not provided	10	50%
Duplicate Appeal	6	30%
Appeal Submitted out of time	3	15%
Appeal Value Incorrect	1	5%
Certificate Scope – cannot be appealed	0	0%



The Caseworker View:



“I would advise providers to please make sure they have all the relevant evidence before submitting their appeal. This is especially true for cases where we’ve nil assessed because of the means assessment. If there is a key piece of information missing, it should be sent in on the appeal. Otherwise, I just have to reject the appeal, which causes more delay for the provider and extra work for us. It must be very annoying for providers.”

Guidance, Hints & Tips



- ❖ Make sure you’re getting your appeals right first time by following the guidance at [chapter 9 of the Escaped Cases Electronic Handbook](#)
- ❖ After any LAA assessment to nil, usually for means assessments, that is overturned, LAA will carry out an assessment of the file as normal in line with [6.81 of the Standard Civil Specification Contract](#)

Data Note:



- ❖ Percentage figures are for the % of appeals rejected, not the full population of appeals.

Escaped Cases: Overturned by Independent Caseworker Review

Caseworker Decision Reason	Year To Date		May		June		July	
	Volume	%	Volume	%	Volume	%	Volume	%
LAA Issue								
Caseworker Error – Decision Making	12	2%	1	2%	1	2%	2	4%
Caseworker Error – Admin Error	2	0%	0	0%	1	2%	0	0%
LAA Error	0	0%	0	0%	0	0%	0	0%
Provider Issue								
Evidence supplied – Means evidence provided	247	44%	25	46%	21	37%	22	49%
Evidence supplied - File notes	111	20%	4	7%	15	26%	10	22%
Evidence supplied - Disbursement justification	44	8%	4	7%	2	4%	2	4%
Evidence supplied – Original/LH form now on file	38	7%	2	4%	5	9%	1	2%
Discretionary allowance	27	5%	5	9%	1	2%	3	7%
Evidence supplied – Correct means assessment carried out for client	24	4%	2	4%	6	11%	1	2%
Evidence supplied – Clients capital confirmed	19	3%	3	6%	3	5%	3	7%
Evidence Supplied - Disbursement breakdown	14	3%	3	6%	1	2%	1	2%
Evidence supplied - Attendance justification	11	2%	2	4%	1	2%	0	0%
Evidence supplied – Client correctly pass-ported	8	1%	3	6%	0	0%	0	0%
Evidence Supplied - Travel Justification	2	0%	0	0%	0	0%	0	0%
Total	559							

The Caseworker View:



“I would go to back to the basics and advise Providers to check their invoices to ensure all necessary details are recorded and correct before submitting the claim. They should be case specific with the client’s name recorded, or case reference if we can cross reference this, and ensure a breakdown of the total fee is provided. This will prevent delays in processing the bills.”

Guidance, Hints & Tips



- ❖ Disbursement vouchers are often missing key information, such as addresses experts have travelled from and to. A full breakdown of all the detail we require is published at [Chapter 5.2 of the Escape Cases Electronic Handbook](#).

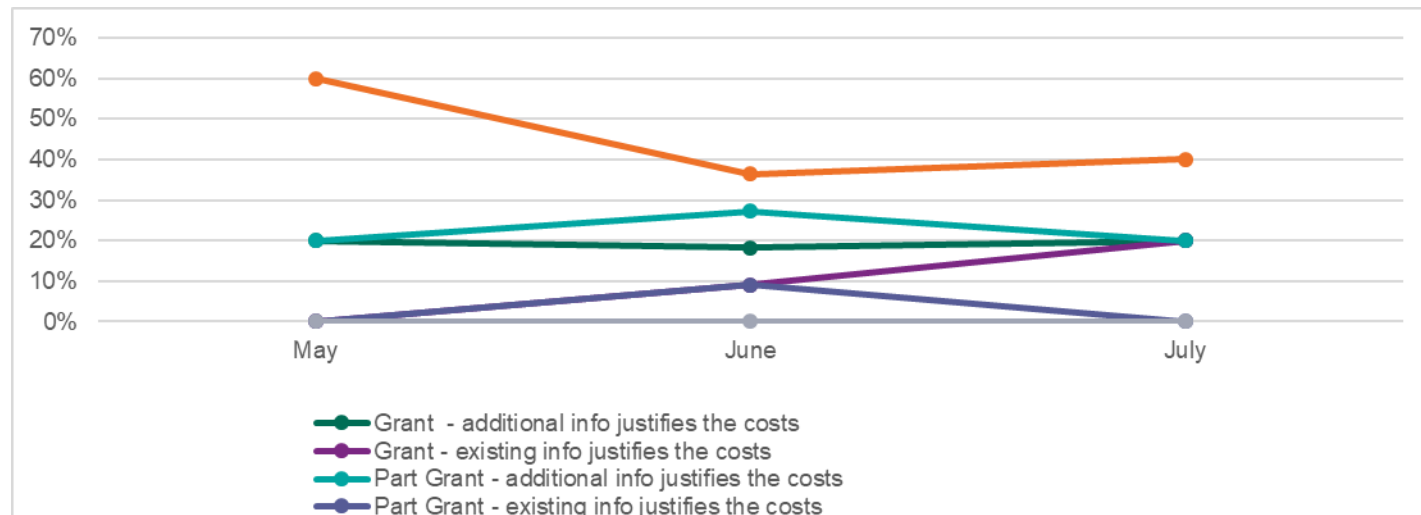
Data Note:



- ❖ Percentage figures are for the % of appeals decided on internal review, not the full population of appeals.
- ❖ For an explanation of terms, please refer to [Appendix 5: Escaped Cases Terms](#)

Escaped Cases: 3-Month Rolling ICA Decisions

ICA Decision	Year To Date		May		June		July	
	Volume	%	Volume	%	Volume	%	Volume	%
Grant - additional info justifies the costs	15	24%	1	20%	2	18%	1	20%
Grant - existing info justifies the costs	7	11%	0	0%	1	9%	1	20%
Part Grant - additional info justifies the costs	11	18%	1	20%	3	27%	1	20%
Part Grant - existing info justifies the costs	1	2%	0	0%	1	9%	0	0%
Refuse - remains unjustified to IFCA	28	45%	3	60%	4	36%	2	40%
Refuse - additional reasons added	0	0%	0	0%	0	0%	0	0%
Total	62		5		11		5	



The Caseworker View:



“It’s really helpful for me when providers use the Appeal pro forma, because it lays out everything being appealed in a straight forward manner. Not only does this let me make a proper review of the assessment, but it also helps lay out the issues for the ICA clearly. This means the ICA can lay out their reasoning for their decision more clearly and in turn helps us understand why our assessment was overturned, or providers understand if the assessment is upheld”

Guidance, Hints & Tips



- ❖ For guidance on the contractual process of a referral to the ICA, please refer to [Chapters 6.71 – 6.81 of the Standard Civil Contract](#)
- ❖ For the Escaped Cases Appeal Pro Forma, please refer to the [Escape Cases Claim Forms](#)

Data Note:



- ❖ Percentage figures are for the % of appeals decided on by an ICA, not the full population of appeals.
- ❖ For an explanation of terms, please refer to [Appendix 5: Escaped Cases Terms](#)

Escaped Cases: 12-Month Rolling Appeals Time Taken

Month	Provider	Stage 1	Stage 2		Overall Time Taken	
	Average Time Taken To Appeal	Time To Process	Time Out With An ICA	Average Time Taken	Average End to End	Longest Overall Time Taken
August	26	5	9	10	5	28
September	43	5	2	28	7	20
October	21	4	3	5	5	44
November	49	5	9	11	6	35
December	44	9	13	14	10	40
January	24	4	7	9	6	39
February	14	6	37	7	7	25
March	13	6	6	8	8	34
April	18	6	6	8	6	24
May	22	6	5	5	7	55
June	25	7	4	4	9	39
July	18	5	6	7	9	22
Totals	26	6	9	10	7	34

The Caseworker View:



“If we’re doing an assessment on the file, it’s really helpful if the provider can lay it out as explained on our model file submission page. By doing that it makes information easier to find – if we can find the evidence first time, then we can pay the claim first time, and that means both us and the solicitor can avoid having to deal with an appeal.”

The Caseworker View:



“If you’re not sure on what evidence should be included in any disbursement voucher, you can refer to the Escape Cases Electronic Handbook for advice on what information we require.”

Guidance, Hints & Tips



- ❖ For guidance on the contractual process of a referral to the ICA, please refer to [Chapters 6.71 – 6.81 of the Standard Civil Contract](#)
- ❖ The format of your file of papers can impact how easily accessible information is for caseworkers. Make sure your file is in chronological order and contains all correspondence, orders and attendance notes: <https://www.gov.uk/guidance/model-file-submissions-for-civil-billing>
- ❖ For the Escaped Cases Appeal Pro Forma, please refer to the [Escape Cases Claim Forms](#)

Data Note:



- ❖ For an explanation of terms, column headers, and how dates are calculated, please refer to [Appendix 5: Escaped Cases Terms](#)

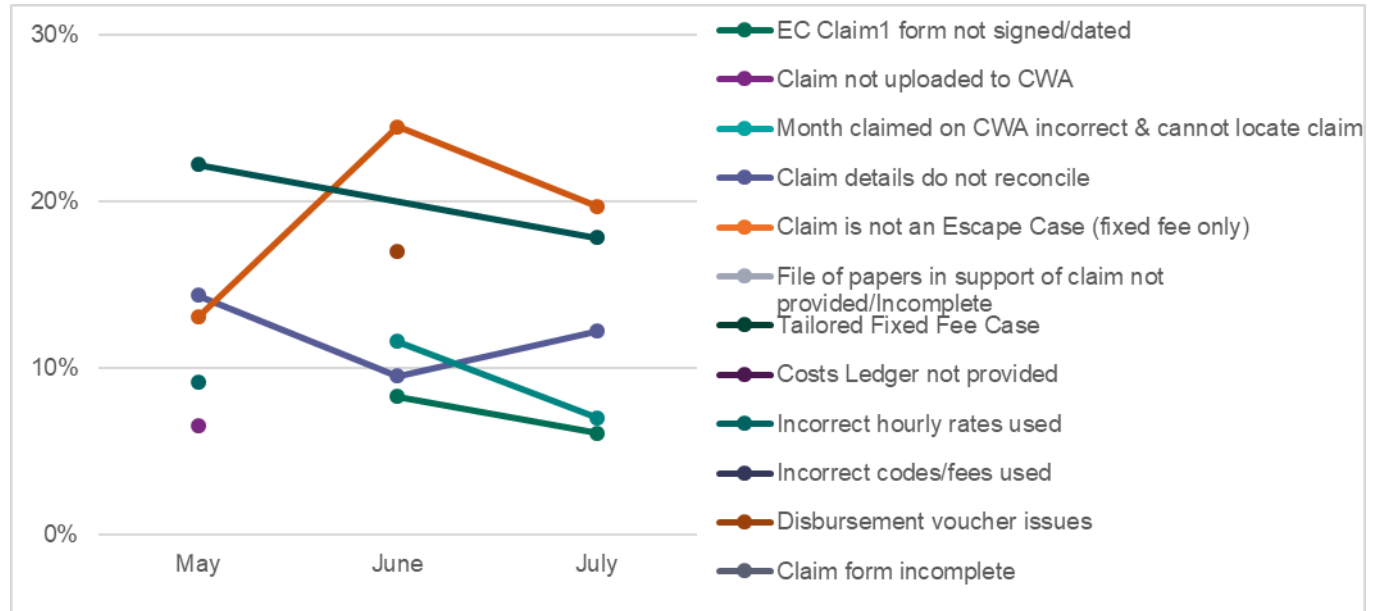
Section 5: Escaped Cases Bill Rejects

Contains data on rejected bills for Civil Escaped
Cases & Legal Help claims



Escaped Cases: 3-Month Breakdown of Bill Reject Reasons – Overall

May		
	No. of Rejects	Reject %
Disbursement voucher missing or unacceptable	34	22%
Claim details do not reconcile	22	14%
File of papers in support of claim not provided	20	13%
Incorrect hourly rates used	14	9%
Claim not uploaded to CWA	10	7%
June		
	No. of Rejects	Reject %
File of papers in support of claim not provided	59	24%
Disbursement voucher issues	41	17%
Miscellaneous/other	28	12%
Claim details do not reconcile	23	10%
EC Claim1 form not signed/dated	20	8%
July		
	No. of Rejects	Reject %
File of papers in support of claim not provided	42	20%
Disbursement voucher missing or unacceptable	38	18%
Claim details do not reconcile	26	12%
Miscellaneous/other	15	7%
EC Claim1 form not signed/dated	13	6%



The Caseworker View:



A common theme I have noticed is disbursement vouchers for experts and interpreters that don't contain their applicable hourly rate as well as the total amount of hours worked on a case. It's difficult to judge the costs claimed without this information, so often I end up returning the claim for more information."

Data Note:



❖ Percentage figures are the total of all rejects.

Escaped Cases: 3-Month Breakdown of Bill Reject Reasons – By Category

Civil			Mental Health			Immigration		
May	No. of Rejects	Reject %		No. of Rejects	Reject %		No. of Rejects	Reject %
Disbursement voucher missing or unacceptable	15	26%	Costs Ledger not provided	6	60%	Disbursement voucher missing or unacceptable	17	33%
Incorrect hourly rates used	12	21%	Disbursement voucher missing or unacceptable	2	20%	Claim details do not reconcile	11	21%
Claim details do not reconcile	10	18%	Claim details do not reconcile	1	10%	File of papers in support of claim not provided	11	21%
File of papers in support of claim not provided	9	16%	Costs ledger – insufficient info	1	10%	Miscellaneous/other	6	12%
Claim not uploaded to CWA	8	14%	Out of scope work claimed	1	10%	UFN does not match or missing	4	8%
June	No. of Rejects	Reject %		No. of Rejects	Reject %		No. of Rejects	Reject %
File of papers in support of claim not provided	47	36%	Claim details do not reconcile	4	33%	Disbursement voucher issues	22	22%
Disbursement voucher issues	19	15%	Claim not uploaded to CWA	2	17%	Miscellaneous/other	16	16%
EC Claim1 form not signed/dated	16	12%	Claim form incomplete	2	17%	Claim details do not reconcile	13	13%
Miscellaneous/other	12	9%	Incorrect hourly rates used	1	8%	File of papers in support of claim not provided	11	11%
Incorrect hourly rates used	9	7%	Month claimed on CWA incorrect	1	8%	Claim is not an Escape Case (fixed fee only)	6	6%
July	No. of Rejects	Reject %		No. of Rejects	Reject %		No. of Rejects	Reject %
File of papers in support of claim not provided	21	22%	File of papers in support of claim not provided	6	33%	Disbursement voucher missing or unacceptable	18	30%
Disbursement voucher missing or unacceptable	17	18%	EC Claim1 form not signed/dated	3	17%	File of papers in support of claim not provided	15	25%
Claim details do not reconcile	15	15%	Disbursement voucher missing or unacceptable	3	17%	Claim details do not reconcile	11	18%
Miscellaneous/other	12	12%	Claim form incomplete	2	11%	Codified rates exceeded	5	8%
EC Claim1 form not signed/dated	8	8%	Incorrect codes/fee used	2	11%	Claim not uploaded to CWA	4	7%

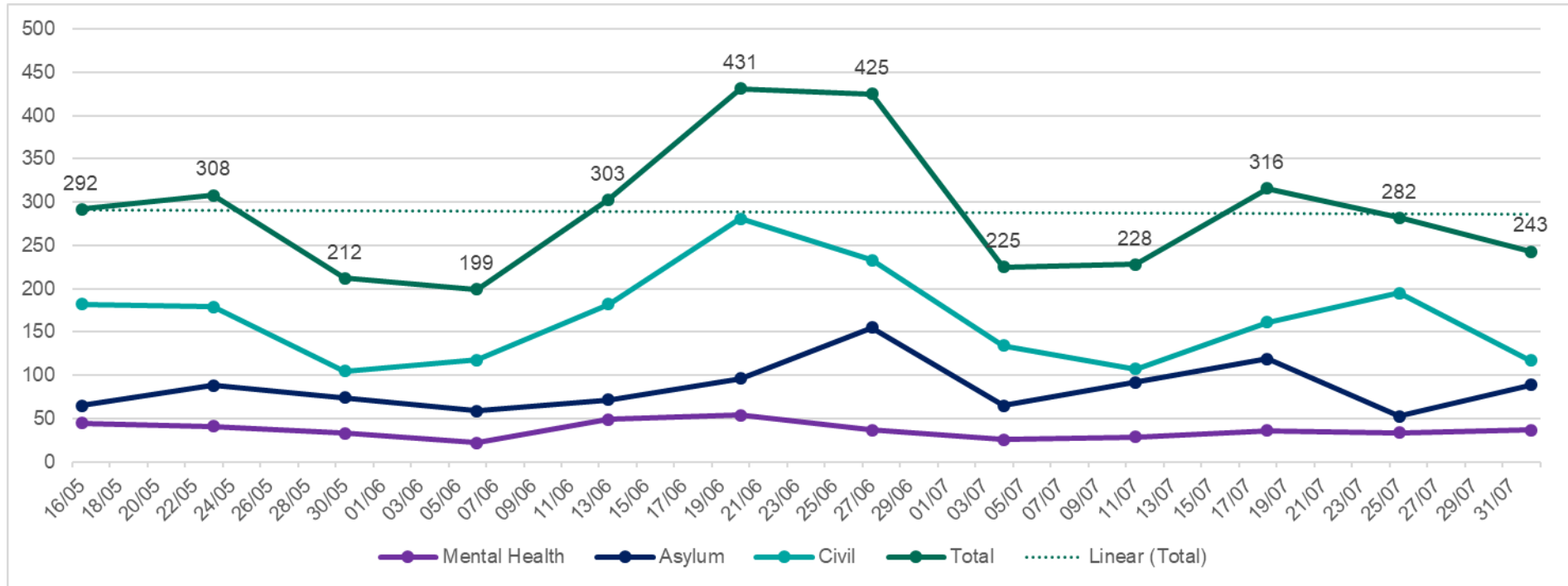
Section 6: Escaped Cases Intakes & Processing Times

Contains data on how long LAA are spending processing your Civil Escaped Cases & Legal Help claims



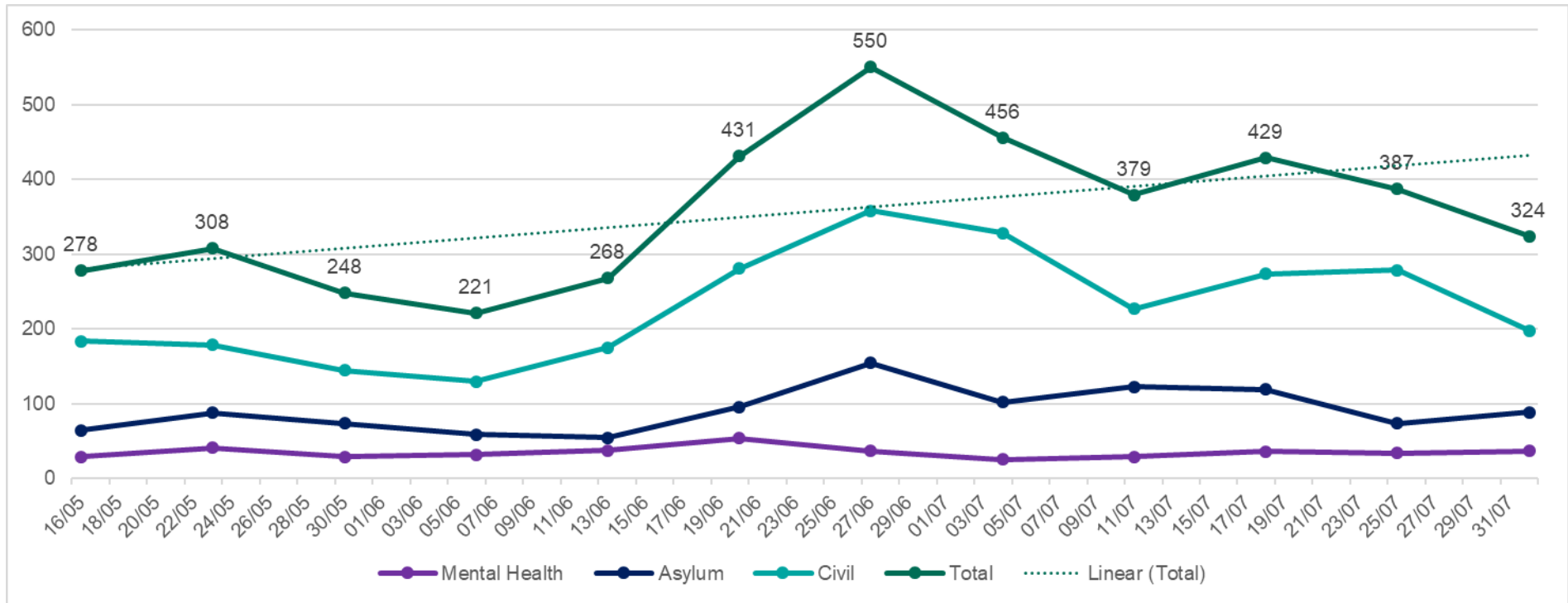
Escaped Cases: 12-Week Intakes

	16/05/2021	23/05/2021	30/05/2021	06/06/2021	13/06/2021	20/06/2021	27/06/2021	04/07/2021	11/07/2021	18/07/2021	25/07/2021	01/08/2021
Mental Health	45	41	33	22	49	54	37	26	29	36	34	37
Asylum	65	88	74	59	72	96	155	65	92	119	53	89
Civil	182	179	105	118	182	281	233	134	107	161	195	117
Total	292	308	212	199	303	431	425	225	228	316	282	243



Escaped Cases: 12 Week Work In Progress (WIP)

	16/05/2021	23/05/2021	30/05/2021	06/06/2021	13/06/2021	20/06/2021	27/06/2021	04/07/2021	11/07/2021	18/07/2021	25/07/2021	01/08/2021
Mental Health	29	41	29	32	38	54	37	26	29	36	34	37
Asylum	65	88	74	59	55	96	155	102	123	119	74	89
Civil	184	179	145	130	175	281	358	328	227	274	279	198
Total	278	308	248	221	268	431	550	456	379	429	387	324



Section 7: Caseworker Topics

Contains trends on issues being raised by caseworkers



Caseworker Topics: VHCC Bills and Disbursement Vouchers

This month for the Caseworker topic, we are looking specifically at the way Very High Cost Cases (VHCC) claims are billed and the requirement for disbursement vouchers to be uploaded.

Civil Claim Fix are seeing a significant number of challenges to VHCC claims that have been rejected requesting vouchers are uploaded.

What is the change?

As part of our improvement of processes, we changed the way disbursements are handled on VHCC claims in June 2021 to provide clarity and consistency across certificated and VHCC claims.

As of 1 June, all VHCC claims must have disbursement vouchers uploaded with them where disbursements are claimed. This will make our requirements on VHCC claims align with our requirements on certificated claims, to make a simpler submission process.

Disbursement vouchers are always required with a civil claim and this will help us pay more of your claims on the first submission.

Guidance, Hints & Tips



❖ You can refer to our initial eAlert of 20 May to confirm the change here: [Civil news: help us pay your high cost claims first time](#)

Provider FAQ

- Q** Is the way we submit bills changing?
A *No, you will still be able to submit bills exactly the same as you always have, but you should make sure any relevant disbursement vouchers are uploaded in response to the automated notification that CCMS will send you.*
- Q** Will the document request notifications be updated?
A *Yes, that is our plan in the longer run. In the meantime, remember, these requests are automated, so may not cover every evidential upload required. You should refer to the Civil Finance Electronic Handbook if you are ever unsure.*
- Q** We uploaded the vouchers with the case plan, is that enough?
A *No, in order to provide a consistent approach across all civil billing, we will need you to upload the final versions of the disbursement vouchers with the bill in CCMS or when you email us your paper claim form.*
- Q** Can we still challenge incorrect rejects?
A *Yes, we would encourage you to challenge any bill you think that we have rejected incorrectly to our Civil Claim Fix team: we'll consider any claim you believe has been incorrectly rejected, not just VHCC claims. This also includes Legal Help/Escape Cases claims and Outcomes on CCMS too.*

Section 8: Bi-Monthly Top Tips

A summary of the pack's top tips



Caseworker Top Tips!

Use the new Appeals video on the Legal Aid Learning website to help you draw an Appeal in CCMS:

“I still find myself rejecting appeals because they are not drawn properly in CCMS – the provider has just resubmitted the whole bill again. It’s really helpful if they watch the 3-minute training video available online before submitting an appeal. It makes it clear what format the appeal needs to come to us in, which lets us deal with more appeals first time”

If You Have a Large Bundle, Highlight Key Information:

- “I recently had a case where I had reduced a claim incorrectly, it was in relation to a drug testing fee. The evidence was listed in the bundle sent to us, but I unfortunately missed it. I had been looking for 4 words in a 104-page bundle: a small needle in a haystack! It would have been really helpful, given the size of the bundle, if the relevant bit had been highlighted. That is extra work upfront, but I wouldn’t have missed it and the provider could have been paid first time. That would have saved both them and us the time we all had to spend with the appeal.”

Explaining Travel Costs Can Help avoid Assessments:

- I’d like to reiterate that when solicitors are claiming mileage to court, they must specify which court they travel to. Otherwise we have to go on other evidence available, which may lead to us reducing what might be legitimate travel costs. This would reduce potentially the number of provisional assessments.”

We Need Your Disbursement Vouchers on VHCC Claims:

- “We’ve seen a big upturn in provider errors for disbursement voucher missing challenges, which are all related to the need for Very High Cost Cases (VHCC) claims to have disbursement vouchers uploaded. It would really help if providers could read the news article that went out on this topic. The change is to standardise Civil Bill submissions, which helps us pay more claims first time.

Double check your hourly rates on EC claims:

“Please make sure to check the hourly rates claimed in housing and family cases before submitting your claim. This will help make sure they reflect the correct level of service: where it’s right first time, it means we can get the bill paid quicker, which is good for the provider as well as less work for us.”

Guidance Links

For getting your disbursements right, refer to:

- [Chapter 10.2 of the Civil Finance Electronic Handbook](#) for what evidence we need.
- [Appendix 7 of the Civil Finance Electronic Handbook](#) for example template invoices with what breakdown we need.

For evidential requirements for remote hearings, please refer to:

- [Remote Family Hearings Guidance](#) for guidance on what we can accept in place of an Advocates Attendance Form.

For information on satisfactory means evidence for your Escaped Cases, please refer to:

- [Guide to Determining Financial Eligibility for Controlled Work](#)

For justifying a claim for enhancement of your hourly rates, refer to:

- [Chapter 3 of the Civil Finance Electronic Handbook](#) for the two-stage test and examples of what would meet the criteria

For guidance on reporting the Statutory Charge to us, refer to:

- [Chapter 22 of the Civil Finance Electronic Handbook](#) for guidance on what information we require.

Section 9: A Spotlight On...

A spotlight on individual teams in LAA



A Spotlight on LAA's Secured Debt Team

This month for the team spotlight, we wanted to share some information about our Secured Debt Team. Here's everything you need to know about them!

Who We Are:

We are the Secured Debt Team. We work across the LAA sites in South Tyneside, Liverpool and Bristol. We are overseen by Steve Starkey and Antony Evans. We were formed in October 2019 to deal with the transfer of secured debt work that had previously processed in London.

The Secured Debt Team deal with Statutory Charge matters where payment has been postponed, and a security has been placed on property to protect the fund from the debt. We deal, with all aspects of work, from applying the debt on new land charge registrations through to the removal of the security once the liability has been fully repaid.

We also deal with all enquires received regarding these debts and regularly correspond with clients, conveyancing solicitors, the Land Registry among others.

Contact Us:



If you have any questions on a case where a land charge is registered or general queries relating to a Secured Debt you can contact us via email: SecuredDebtTeam@justice.gov.uk

What Are Our Recent Successes?






- ❖ Completed a large NAO sample and dealt with the associated complex queries that came with reviewing historic cases.
- ❖ Trained caseworkers nationally via Teams to process applications to remove charges and securities registered against properties and ensure we can continue to turn these round as quickly as possible
- ❖ Created the Secured Debt Handbook: an ongoing project, building a document to house the vast amount of training materials regarding Secured Debt and processing on CCMS.
- ❖ Created a Secured Debt Improvement Group to identify issues and improve processes within the Secured Debt Team. We have members from the Secured Debt Team, Statutory Charge caseworkers and call handlers from the Customer Services Team. This group has created stronger bonds and collaboration across teams so that we can share best practice and ensure that the best customer service is being provided.

Section 10: Appendices

Contains explanations of key terms and how data is reported.



Appendix 1: General Terms & Glossary

Glossary	Icon Guide	
<p>❖ CIS (Corporate Information System) LAA's database for paper-based claims</p>		<p>Electronic Assistance Hints and tips to help you use this document electronically</p>
<p>❖ CCMS (Client and Cost Management System) LAA's online database</p>		<p>Printing Assistance Guidance to help you if you want to print the document</p>
<p>❖ KPI (Key Performance Indicator) A contract-based performance measure used to monitor the performance of firms</p>		<p>Data Note Notes on how the data is collected, what the data is displaying and what the column headings mean</p>
		<p>The Caseworker View Quotes directly from our caseworkers to help you help us say yes to your claim first time</p>
		<p>Guidance, Hints & Tips Links to LAA's guidance, all publicly available for you to access</p>

Appendix 2: Appeals Explanation

Appeal Decisions:

- ❖ **ICA**
Independent Costs Assessor
- ❖ **Reject**
Appeal was not processable and returned to provider. These are not monitored under any KPI.
- ❖ **Grant**
Appeal was overturned on internal review by a caseworker.
- ❖ **Refuse**
ICA has considered the appeal and upheld LAA's assessment.
- ❖ **Reinstate**
ICA has considered the appeal and overturned LAA's assessment in full or in part.

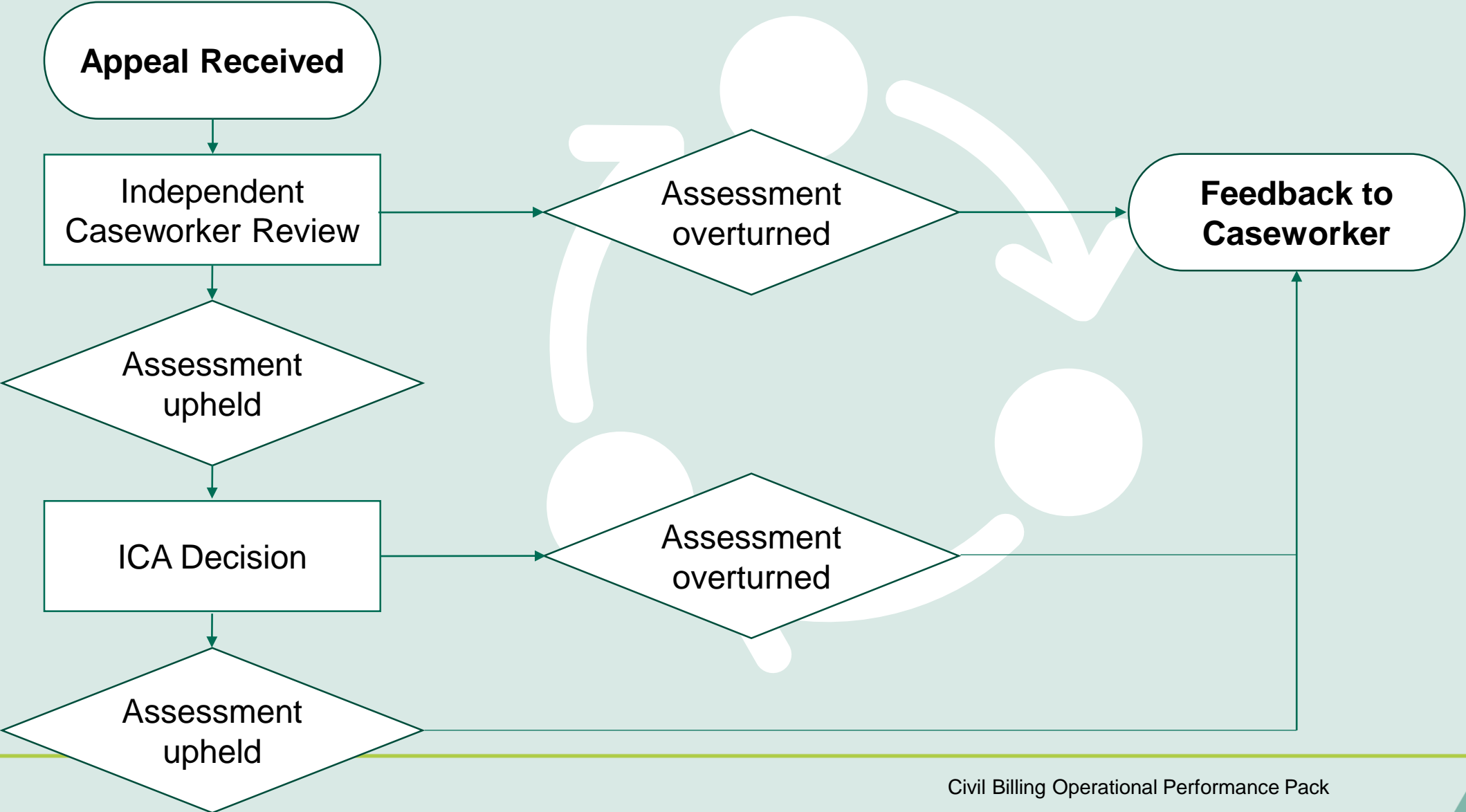
Caseworker Review Decisions:

- ❖ **Discretionary Allowance**
A small amount that is not worth the cost of sending to an ICA. For example, an appeal for a total of 2 hours 30 minutes, of which most is granted on internal review, but 6 minutes remains under dispute. The costs of sending to the ICA outweigh the cost of granting.
- ❖ **Evidence Supplied on Review**
General evidence supplied that does not fit in to one of the specific categories.
- ❖ **LAA Error**
LAA accepts the assessment is incorrect, but beyond the control of the caseworker.

Appeal Time Taken Data:

- ❖ Appeals data is in respect of appeals concluded in that month.
- ❖ **Average Time Taken to Appeal:**
The average time taken by the provider or counsel to submit the appeal, from the date LAA conducted the assessment to the date LAA received the appeal.
- ❖ **Time To Process:**
The 1st Stage caseworker review relates to time taken from receipt of the appeal to initial caseworker review.
- ❖ **Time Out With An ICA:**
Returned from ICA relates to the average amount of days taken for an appeal decision to be received back from the ICA.
- ❖ **Average Time Taken:**
The average time take by the ICA from the date LAA sends the appeal to the ICA for a decision until the ICA returns the decision to LAA for actioning.
- ❖ **Average End to End:**
Overall time taken is calculated from date of receipt to the date the provider was notified of the decision.
- ❖ **Longest Overall Time Taken:**
The single longest appeal LAA dealt with in that month, calculated from date of receipt to the date the provider was notified of the decision.

Appendix 2: Civil Cost Appeal Feedback Process



Appendix 3: Rejects & Civil Claim Fix Terms Explanation

As of April 2021, LAA no longer distinguishes between KPI and non-KPI rejects. This is to help an open and honest conversation with providers on how we are really performing on civil bill rejects and drive the real reject rate down further.

LAA now distinguishes between a reject or a document request and formally reports on the former only.

❖ **Reject**

A rejected claim that has been formally returned to the provider for amendment, for missing information to be provided or further information to help process the claim. Applies to claims made via CCMS and on paper forms also.

❖ **Document Request**

A specific request for more information made by a caseworker in a limited number of circumstances. Applies to CCMS claims only.

For specific examples of each type of reject, please refer to [Chapter 16.1 of the Civil Finance Electronic Handbook](#)

Civil Claim Fix Categories:

❖ **Caseworker Error**

The caseworker decision to reject was incorrect.

❖ **Provider Error**

The caseworker decision to reject was correct.

❖ **LAA Error**

LAA accepts the reject is incorrect, but beyond the control of the caseworker.

❖ **Inconclusive**

Fault for the reject cannot be found on either side.

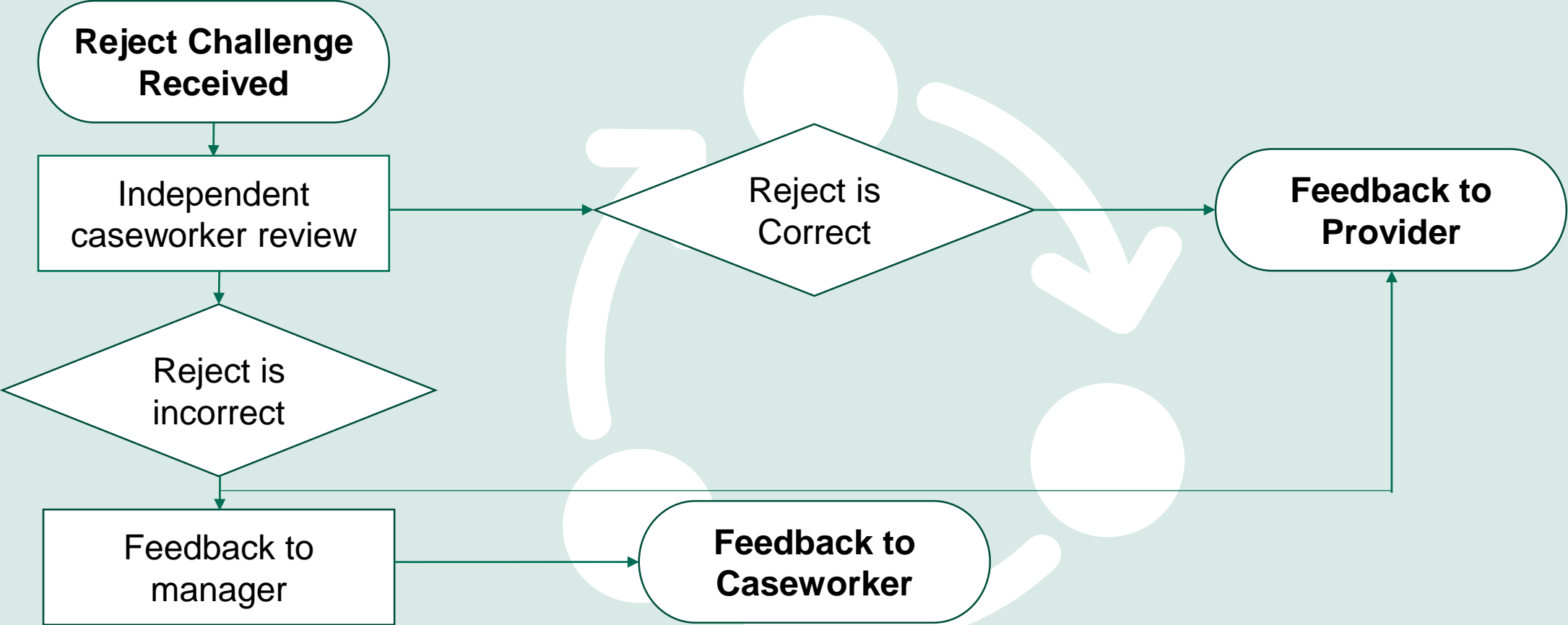
❖ **Provider Query**

A query submitted by a provider, not a challenge to a reject.

❖ **Internal Referral**

A referral to remove a rejection following internal quality control. Applies to paper claims only.

Appendix 3: Civil Claim Fix Feedback Process



Appendix 4: Processing Explanations

Processing Time Explanations:

- ❖ The time taken is calculated from the day after the bill becomes assessable until the final decision is made: this means the date that the money is either paid in to the provider or counsel's account or the day the claim is rejected.
- ❖ This means the day the bill comes available for processing counts as day 0. Time the claim is with the provider or counsel, for example, whilst awaiting documents to be uploaded or the Outcome to be completed, is excluded.

For live updates, please refer to [Civil Processing Dates](#)

KPI Targets

- ❖ 'Local target' is a processing target (rather than a payment target).
- ❖ 'KPI target' is to **pay 90% of complete and accurate bills** within 20 working days.

Appendix 5: Escaped Cases Terms

Initial Decisions Made

❖ **Allowed as Claimed**

A claim that has been assessed as drawn by the provider.

❖ **Reduced but Escaped**

A claim that has been reduced, but still passes the escaped threshold.

❖ **Reduced to Fixed Fee**

A claim that has been reduced to the applicable fixed fee.

❖ **Nil Assessed**

A claim that has been assessed to nil.

❖ **Rejected**

A claim that has been returned to the provider without being paid.

Appeal Time Taken Data:

❖ Appeals data is in respect of appeals concluded in that month.

❖ **Average Time Taken to Appeal:**

The average time taken by the provider or counsel to submit the appeal, from the date LAA conducted the assessment to the date LAA received the appeal.

❖ **Time To Process:**

The 1st Stage caseworker review relates to time taken from receipt of the appeal to initial caseworker review.

❖ **Time Out With An ICA:**

Returned from ICA relates to the average amount of days taken for an appeal decision to be received back from the ICA.

❖ **Average Time Taken:**

The average time take by the ICA from the date LAA sends the appeal to the ICA for a decision until the ICA returns the decision to LAA for actioning.

❖ **Average End to End:**

Overall time taken is calculated from date of receipt to the date the provider was notified of the decision.

❖ **Longest Overall Time Taken:**

The single longest appeal LAA dealt with in that month, calculated from date of receipt to the date the provider was notified of the decision.



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